



**State of Missouri**  
John R. Ashcroft, Secretary of State

Corporations Division  
PO Box 778 / 600 W. Main St., Rm. 322  
Jefferson City, MO 65102

**INFORMATION ONLY**

**Statement of Resignation of Registered Agent  
By a Foreign or Domestic For Profit / Non Profit Corporation**  
*(Submit with filing fee of \$10.00)*

Charter #: \_\_\_\_\_

1. The name of the business is

\_\_\_\_\_

2. The street address of the registered office is

\_\_\_\_\_

3. The name of the registered agent is

\_\_\_\_\_

In Affirmation thereof, the facts stated above are true and correct:  
(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo)

\_\_\_\_\_  
*Resigning Agent Signature*

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Date*

Name and address to return filed document:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, and Zip Code: \_\_\_\_\_