

**BARBARA K. CEGAVSKE Secretary of State** 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708

Website: www.nvsos.gov

## **Commercial Registered Agent Registration Statement**

(PURSUANT TO NRS 77.320)

Instructions: An individual or entity transacting business as a Registered Agent in this state for 10 or more business entities must register with the Secretary of State as a Commercial Registered Agent.

Person registering as a commercial registered as Legal Name of Individual:	gent:			OR OFFICE USE ONLY ' - DO NOT HIGHLIGHT
Legal Name of Entity:	or			
2. Entity Type:				
3. Nevada Business ID#:				
4. Jurisdiction of Organization:				
5. All DBAs, fictitious firm names and websites or d business (add pages, if necessary):	lomains by which this	commercial regi	stered agen	t will do
6. The above listed person is in the business of ser address of the person in this State to which service sent to entities represented by it may be delivered in	of process and other		ıments being	
Street Address	City		Nevada	Zin Code
Street Address	City		Nevada	Zip Code
Mailing Address (only if different from above)	City		]	Zip Code
7. Email address where electronic notices may be s	sent:			
8. Individual who has the authority to act on behalf	of the commercial reg	gistered agent:		
Name:		Telephone:		
Address:				
Street Address	City		State	Zip Code
9. Required Statement: The person registering as managing agent of a commercial registered agent if the individual has had his or her civil right restored. registered agent or a director, officer or managing a authority of this state or another state or enjoined because the individual engaged in conduct a defraud the public.	nas not been convicte The registered agen agent of a registered a by a court of competer	ed of a felony, an at has not had his agent denied or r at jurisdiction fror	d if convicte s or her abili evoked by a n serving as	ed of a felony, ty to serve as a appropriate s a registered
10. Signature: I declare, to the best of my knowled document is correct and acknowledge that pursuan false or forged instrument for filing in the Office of the	it to NRS 239.330, it is	s a category C fe		
First Name of Circum (Britis)	Modulo Less La constitución	( 0'		
First Name of Signer (Print)	Middle Initial Last Nan	ne of Signer		
Authorized Signature of Individual or On Behalf of Entity		_ Date		