

Ohio Secretary of State Central Ohio: (614) 466-3910

Toll Free: (877) SOS-FILE (767-3453)

www.OhioSecretaryofState.gov Busserv@OhioSecretaryofState.gov

Please return the approval certificate to:

Name:	(Individual or Business Name)
To the attention of:	(If necessary)
Address:	
City:	
State:	ZIP Code:
Phone Number:	E-mail Address:
office regarding Bu Check here if you being created or u	would like to receive important notices via e-mail from the Ohio Secretary of State's usiness Services. would like to be signed up for our Filing Notification System for the business entity pdated by filing this form. This is a free service provided to notify you via e-mail when led on your business record.
Type of Service Being	Requested: (PLEASE CHECK ONE BOX BELOW)
examined for the pur	: A filing form, to be submitted at a later date for processing, may be submitted to be roose of advising as to the acceptability of the proposed filing for a fee of \$50.00. The complete within 1-2 business days.
_	nly the filing fee listed on page one of the form is required and the filing will be imately 3-7 business days. The processing time may vary based on the volume of ur office.
_	By including an Expedite fee of \$100.00, in addition to the regular filing fee on page filing will be processed within 2 business days after it is received by our office.
Expedite Service 2:	By including an Expedite fee of \$200.00, in addition to the regular filing fee on page

one of the form, the filing will be processed within 1 business day after it is received by our office. This service

Expedite Service 3: By including an Expedite fee of \$300.00, **in addition** to the regular filing fee on page one of the form, the filing will be processed within 4 hours after it is received by our office, if received by 1:00 p.m. This service is only available to walk-in customers who hand deliver the document to the Client Service Center.

is only available to walk-in customers who hand deliver the document to the Client Service Center.



City

Form 521 Prescribed by the: Ohio Secretary of State

Central Ohio: (614) 466-3910

Toll Free: (877) SOS-FILE (767-3453)

www.OhioSecretaryofState.gov Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

Regular Filing (non expedite) P.O. Box 788 Columbus, OH 43216

Expedite Filing (Two-business day processing time requires an additional \$100.00).

Zip Code

State

P.O. Box 1390 Columbus, OH 43216

Statutory Agent Update Filing Fee: \$25 (CHECK ONLY ONE(1) BOX) (1) Subsequent Appointment of Agent (2) Change of Address of an Agent (3) Resignation of Agent Corp (155-AGR) Corp (165-AGS) Corp (145-AGA) ☐ LP (155-AGR) ☐ LP (165-AGS) LP (145-AGA) LLC (153-LAG) LLC (171-LSA) LLC (144-LAD) Partnership (153-AGR) **Business Trust Business Trust Business Trust** (171-LSA) (144-LAD) (153-LAG) Name of Entity Charter, License or Registration No. Name of Current Agent Complete the information in this section if box (1) is checked Name and Address of New Agent Name of Agent Mailing Address

Complete the inf	ormation in this section if box (1) is checked and business is an Onio entity
	ACCEPTANCE OF APPOINTMENT FOR DOMESTIC ENTITY'S AGENT
The Undersigned,	Name of Agent , named herein as the
statutory agent fo	Name of Business Entity , hereby acknowledges
and accepts the a	ppointment of statutory agent for said entity.
	Signature:
	Individual Agent's Signature/Signature on behalf of Corporate Ager
	an agent is an individual using a P.O. Box, the agent must check this box to confirm that the agent n Ohio resident.
Complete the inf	ormation in this section if box (2) is checked
New Address of A	gent
	Mailing Address
	City State Zip Code
	an agent is an individual using a P.O. Box, the agent must check this box to confirm that the agent n Ohio resident.
Complete the inf	ormation in this section if box (3) is checked
The agent of reco	rd for the entity identified on page 1 resigns as statutory agent.
	own address of the entity's principal office where a copy of this Resignation of Agent was sent as of the for to the date filed.
Mailing	Address
City	State Zip Code

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.				
Required				
Agent update must be signed by an authorized	Authorized Representative	I		
representative (see		1		
instructions for specific information).				
·	By (if applicable)			
If authorized representative is an individual, then they				
must sign in the "signature"	Print Name			
box and print their name in the "Print Name" box.				
in the Fint Name box.				
If authorized representative is a business entity, not an				
individual, then please print	Authorized Representative			
the business name in the				
"signature" box, an authorized representative				
of the business entity	By (if applicable)			
must sign in the "By" box and print their name in the		1		
"Print Name" box.	Print Name			
	i init ivanie			

Instructions for Statutory Agent Update

This form should be used to update statutory agent information for a corporation, limited partnership, limited liability company, partnership or business trust. If a corporation, limited partnership or limited liability company or business trust would like to appoint a new statutory agent, please select box 1. If a corporation, limited partnership, limited liability company, or business trust would like to change the address of the current agent, please select box 2. If the agent of a corporation, limited partnership, limited liability company, partnership, or business trust would like to resign from their position, please select box 3.

A partnership and limited liability partnership must complete a statement of amendment to appoint a new agent or change the address of the current agent.

Entity Information

The corporation, limited partnership, limited liability company, partnership, or business trust must provide its name, charter/license/registration number and the name of the current agent. The current agent's name must be the same as the agent listed in our office's records.

Appointment of New Agent

Pursuant to Ohio Revised Code sections 1701.07, 1702.06, 1703.041, 1782.04, 1705.06 and 1746.04, a corporation, limited partnership, limited liability corporation and business trust must appoint and maintain a statutory agent to accept service of process on behalf of the entity. The statutory agent must be one of the following: (1) an Ohio resident; (2) an Ohio corporation; or (3) a foreign corporation that is licensed to do business in Ohio.

If the entity is a **domestic** corporation, limited liability partnership, limited liability company or business trust, the statutory agent must sign the Acceptance of Appointment on Page 2. The agent of a **foreign** entity does not have to accept appointment by signing the form.

If the new statutory agent is an individual using a P.O. Box address, the agent must check the box to confirm that he or she is an Ohio resident.

Change of Address of an Agent

Pursuant to Ohio Revised Code sections 1701.07, 1702.06, 1703.041, 1782.04, 1705.06 and 1746.04, a corporation, limited partnership, limited liability company and business trust must appoint and maintain a statutory agent to accept service of process on behalf of the entity. The statutory agent must be one of the following: (1) an Ohio resident; (2) an Ohio corporation; or (3) a foreign corporation that is licensed to do business in Ohio.

Please provide the new address. If the statutory agent is an individual using a P.O. Box address, the appropriate box must be checked to confirm that he or she is an Ohio resident.

Resignation of Agent

Pursuant to Ohio Revised Code sections 1701.07, 1702.06, 1703.041, 1705.06, 1776.07, 1782.04, 1705.06 and 1746.04, an agent may resign by filing this form, stating their intent to resign and providing the current or last known address of the entity's principal office. On the date of filing this form with our office or prior to that date, the agent must send a copy of the resignation form to the current or last known address of the entity's principal office.

Form 521 Last Revised: 2/6/12

For a domestic for-profit corporation, partnership, limited partnership, limited liability company and business trust, thirty days after the filing of this form, the authority of the agent will terminate. For a domestic nonprofit corporation or a foreign corporation, sixty days after the filing of this form, the authority of the agent will terminate.

Additional Provisions

If the information you wish to provide for the record does not fit on the form, please attach additional provisions on a single-sided, $8 \frac{1}{2} \times 11$ sheet(s) of paper.

Signature(s)

After completing all information on the filing form, please make sure to sign the form. If the entity is a domestic corporation, the form must be signed by the incorporators or a corporate officer. If the entity is a foreign corporation, the form must be signed by an authorized representative. If the entity is a domestic or foreign limited partnership, the form must be signed by an officer, all of the general partners or a majority of the general partners. If the entity is a domestic or foreign limited liability company, the form must be signed by a member, manager or an authorized representative. If the entity is a business trust, an authorized representative must sign. If the form is used for an agent's resignation, the resigning agent must sign the form.

**Note: Our office cannot file or record a document that contains a social security number or tax identifications number. Please do not enter a social security number or tax identification number, in any format, on this form.

Form 521 Last Revised: 2/6/12