STATE OF MAINE

NONCOMMERCIAL REGISTERED AGENT

STATEMENT OF RESIGNATION

iling Fee \$15.00		
	Deputy Secretary of State	
A True	e Copy When Attested By Signature	

(Name of Corporation as it appears on the records of the Secretary of State)

Deputy Secretary of State

Pursuant to 5 MRSA §111, the undersigned noncommercial registered agent executes and delivers the following statement of resignation from serving as agent for service of process for this nonprofit corporation:

FIRST:	The name and address of the resigning noncommercial registered agent as it appears on the record in the Secretary of
	State's office:

(name of current noncommercial registered agent)

(physical street address, city, state and zip code – as it appears on the record)

SECOND: The name and address of the person to which the noncommercial registered agent will send the required notice to:

(insert name)

(mailing address including zip code)

the ____

at

(title of corporate officer)

Dated _____

(signature of noncommercial registered agent)

(type or print name)

_____ of the corporation.

Pursuant to 5 MRSA §111.3, the registered agent shall promptly furnish the represented entity notice in a record of the date on which a statement of resignation was filed.

Please remit your payment made payable to the Maine Secretary of State.

 Submit completed form to:
 Secretary of State

 Division of Corporations, UCC and Commissions
 101 State House Station, Augusta, ME 04333-0101

 Telephone Inquiries:
 (207) 624-7752
 Email Inquiries: CEC.Corporations@Maine.gov

Customer Contact Cover Letter

Name of entity(s) on the submitted filings:		
Optional special handling request(s): (check or	nly if applicable)	
\Box Hold attested copy for pick up (will be	be required to pick up at our office in Augusta, Maine)	
☐ 24-hour expedited filing (next busine	ess day) service: \$50 additional filing fee per entity	
Immediate expedited filing (same bu	siness day): \$100 additional filing fee per entity	
NOTE: Only one expedite fee is required if filing	g multiple documents for the <u>same entity/charter number</u> at the same tim	
Payment can be made by check or money order obtain a credit card voucher at https://www.maine	er (payable to Maine Secretary of State) or by credit card. You may e.gov/sos/cec/forms/credit.pdf.	
Total fee(s)) enclosed: \$	
(Name of contact person)	(Daytime telephone number)	
(Contact email address for <u>this</u> filing)	(Email address to use for annual report reminders)	
Name and address of person to return the attest	red copy of the completed filing:	
(Nar	me of attested copy recipient)	
	(Firm or Company)	
	(Mailing Address)	
	(City, State & Zip)	
	(Firm or Company) (Mailing Address) (City, State & Zip) nd telephone number or email address will result in any e	

For questions regarding the above filing(s), please call or email our office at (207) 624-7752 or cec.corporations@maine.gov

Submit filings to: Mailing Address if using US Postal Service Department of the Secretary of State Corporations, UCC and Commissions 101 State House Station Augusta, ME 04333-0101

Mailing Address if using FedEx/UPS Department of the Secretary of State Corporations, UCC and Commissions 111 Sewall Street, 4th Floor Augusta, ME 04330