

STATE OF MAINE

STATEMENT OF APPOINTMENT OF AGENT FOR SERVICE OF PROCESS FOR A NONFILING DOMESTIC ENTITY OR A NONQUALIFIED FOREIGN ENTITY

Deputy Secretary of State
A True Copy When Attested By Signature
Deputy Secretary of State

Pursuant to 5 MRSA §112 the undersigned entity executes and delivers the following statement of appointment of agent for service of process.

FIRST: The name and entity type of the domestic nonfiling or foreign nonqualified entity is:

(entity name)

(type of entity)

SECOND: Jurisdiction of organization:

THIRD: The name and address of the Agent for Service of Process is:

(name of agent)

(physical address – street, city, state and zip code – No P.O. Box)

FOURTH: The appointment of a registered agent under this section does not qualify a nonqualified foreign entity to do business in the State and is not sufficient alone to create personal jurisdiction over the nonqualified foreign entity in this State.

FIFTH: This statement appointing an agent for service of process is effective for a period of 5 years after the date of filing.

DATED

\*By (signature)

(type or print name and capacity)

\*This statement MUST be signed by any duly authorized officer.

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

# Filer Contact Cover Letter

To: Department of the Secretary of State  
Division of Corporations, UCC and Commissions  
101 State House Station  
Augusta, ME 04333-0101

Tel. (207) 624-7752

Name of Entity (s):

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List type of filing(s) enclosed (i.e. Articles of Incorporation, Articles of Merger, Articles of Amendment, Certificate of Correction, etc.) Attach additional pages as needed.

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Special handling request(s): (check all that apply)

- Hold for pick up  
 Expedited filing - 24 hour service (\$50 additional filing fee per entity, per service)  
 Expedited filing - Immediate service (\$100 additional filing fee per entity, per service)

Total filing fee(s) enclosed: \$ \_\_\_\_\_

**Contact Information – questions regarding the above filing(s), please call or email:** (failure to provide a contact name and telephone number or email address will result in the return of the erroneous filing (s) by the Secretary of State's office)

\_\_\_\_\_  
(Name of contact person) (Daytime telephone number)

\_\_\_\_\_  
(Email address)

The enclosed filing(s) and fee(s) are submitted for filing. Please return the attested copy to the following address:

\_\_\_\_\_  
(Name of attested recipient)

\_\_\_\_\_  
(Firm or Company)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City, State & Zip)