

Arkansas Secretary of State

John Thurston

1401 W. Capitol, Suite 250, Little Rock, AR 72201 501-682-3409 • www.sos.arkansas.gov

Commercial Registered Agent Termination Statement

(Please type or print)

The undersigned, pursuant to the Arkansas Code Anno	otated § 4-27-107, sets forth the following:
Name of individual or entity:	
Fictitious name:	
The above referenced individual or entity is no longer in Registered Agent in Arkansas in accordance with Act 1	
I understand that knowingly signing a false document with the is a Class C misdemeanor and is punishable by a fine up to	•
Executed this day of ,	·
A commercial registered agent termination statement to which it is filed.	akes effect on the 31st day after the day on
Printed Name and Title of Authorized Individual Signatur	re of Authorized