

**STATE OF SOUTH CAROLINA  
SECRETARY OF STATE**

**NOTICE OF CHANGE OF (1) DESIGNATED OFFICE, (2) AGENT FOR SERVICE OF  
PROCESS, OR (3) ADDRESS OF AGENT  
LIMITED LIABILITY COMPANY – DOMESTIC AND FOREIGN**

Pursuant to the 1976 S.C. Code of Laws, as amended, §33-44-109, the limited liability company submits the following statement of change.

1. The name of the limited liability company is:

2. The limited liability company is (check either "a" or "b", whichever is applicable):

- a. A South Carolina limited liability company.
- b. A foreign limited liability company authorized to transact business in South Carolina.

3. a. The South Carolina street address of the current designated office for the limited liability company is:

\_\_\_\_\_

(Street Address)

\_\_\_\_\_

(City, State, Zip Code)

b. The name of the company's current agent for service of process is:

\_\_\_\_\_

(Name)

c. The South Carolina street address of the current registered agent's office is:

\_\_\_\_\_

(Street Address)

\_\_\_\_\_

(City, State, Zip Code)

4. Check and complete all boxes (a-c) that apply.

- a. The company is changing the address of its designated office.

The new South Carolina address of the designated office of the limited liability company is:

\_\_\_\_\_

(Street Address)

\_\_\_\_\_

(City, State, Zip Code)

Name of Limited Liability Company

b. The company is changing its agent for service of process.

The name of the company's new agent for service of process is:

\_\_\_\_\_  
(Name)

I hereby consent to the appointment as registered agent.

\_\_\_\_\_  
(Agent's Signature)

c. The company is changing the street address of the agent for service of process.

The new South Carolina street address of the registered agent's office is:

\_\_\_\_\_  
(Street Address)

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

5. Unless otherwise specified, these articles are effective when endorsed for filing by the Secretary of State. Specify the time and date of any delayed effective date \_\_\_\_\_  
(Date)

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

Capacity/Position of Person Signing (**You must check one box.**)

Manager     Member     Organizer

Fiduciary     Attorney-in-Fact

### Filing Checklist

Notice of Change of (1) Designated Office, (2) Agent for Service of Process, or (3) Address of Agent (filed in duplicate). Two copies of this form, the original and either a duplicate original or a conformed copy, must be filed. \$10.00 made payable to the Secretary of State's Office

Include a self-addressed stamped envelope to have a filed copy returned to you by mail.

Make sure the proper individual has signed the form [Please see the 1976 S.C. Code of Laws, as amended, §33-44-205(a)].

**Limited Liability Company forms filed with the Secretary of State must be signed in the name of the company by a:**

- (1) manager of a manager-managed company**
- (2) member of a member-managed company**
- (3) person organizing the company, if the company has not been formed or**
- (4) fiduciary, if the company is in the hands of a receiver, trustee or other court-appointed fiduciary**

Return all documents to: Secretary of State  
Attn: Corporate Filings  
1205 Pendleton Street, Suite 525  
Columbia, SC 29201