

Business Program Colorado Secretary of State 1700 Broadway, Ste. 550 Denver, CO 80290 Phone: 303-894-2200 Fax: 3 Email: <u>Business@coloradosos.gov</u> Webs

Fax: 303-869-4864 Website: <u>www.coloradosos.gov</u>

Mass Change Registered Agent Instructions

Mass Change Registered Agent Instructions Our office can update the name and/or address of a registered agent on file. To do this individually, file a Statement of Change Changing the Registered Agent Information or make changes while filing your periodic report. Otherwise, our office can perform a mass change. To perform this cost-effectively, we only accept requests if the total count of records is 550 or greater.

You can do your own preliminary search to check the number of records which need changed by going to <u>Colorado Information Marketplace</u> and searching or filtering the Agent.

Information in the "Business Entities in Colorado" dataset. Do not include any statuses you don't wish to update such as merged.

Once we've received your request form and payment, we will prepare a spreadsheet listing all records found that match your criteria. We will email this spreadsheet to you for review and approval.

After the spreadsheet is finalized, we will email you the statement of change form along with the final processing fee. Once we have received your document and payment, we will process your request. This final run could take a couple of weeks.

Please be aware this whole process could take 2-3 months.

Questions? Call 303-894-2200, option 2





Mass Change Registered Agent

Processing fee: \$50.00 at the time of application & approximately \$1.80 per record before the change is applied (non-refundable).

Fill out the form online and mail to our office along with the \$50.00 fee. Requests for data sets with fewer than 550 records will not be accepted.

Our office will perform an initial query to determine which records will need to be updated and send it to you for approval. After final review, we will send you a statement of change form to be returned with final payment.

Section 1 – Current registered agent name

The current registered agent is:

Section 2 - Current registered agent address

The current registered agent address is: Street Address 1

Street Address 2

City	State	ZIP code	
Province (if applicable)	Country		
	,		

Section 3 – New registered agent name (if applicable)

The new registered agent name (if applicable) is:



Section 4 – New registered agent address (if applicable)

The new registered agent address	(if applicable) is:		
Address 1			
Address 2			
City	State	ZIP code	
Province (if applicable)	Country		

Section 5 – Additional Information

Additional Information:

Section 6 – Contact information

Contact Information:

Last name	First name	Middle	Suffix
Address 1			
Address 2]
City	State	ZIP code]
Province (if applicable)	Country		
Email			
Phone]



Business Program Colorado Secretary of State 1700 Broadway, Ste. 550 Denver, CO 80290 Phone: 303-894-2200 Fax: 3 Email: <u>Business@coloradosos.gov</u> Webs

Fax: 303-869-4864 Website: <u>www.coloradosos.gov</u>

Business Information Survey (Optional)

Submit with your form if you want to add, change, or remove survey information.

Survey information can be added, changed, or removed when you file a form with our office. The information on this survey is associated with the entity's record- it does not become a part of the document that you file with us.

This survey is voluntary. Any information that you enter will be available to the public. The information is being gathered as required by law- see House Bill 13-1167 for information.

Entity information:

ID Number:

Entity name:

Choose one:

1. Remove all survey information from this entity's record.

OR

- 2. Add or update the survey information on this entity's record as follows:
 - a) Gender
 -) Male
 -) Female
 - Choose not to answer / Remove this information
 - b) Veteran?
 - Yes
 -) No
 - Choose not to answer / Remove this information



C)	Person	with	а	disability?	

\bigcirc				
\bigcirc	Yes			
\bigcirc	No			
O Race	Choose not to answer / Rem	iove th	nis information	
\bigcirc	African American	\bigcirc	Latino	
\bigcirc	Anglo	\bigcirc	Native American	
\bigcirc	Asian	\bigcirc	Other	
\bigcirc	Choose not to answer / Remove this information			

e) NAICS code(s)

d)

Enter up to five. For more information, see the NAICS Association site at <u>https://www.naics.com/search/</u>.

NAICS code number 1

NAICS code number 2

NAICS code number 3

NAICS code number 4

NAICS code number 5



Filer's information:					
Last name	First name	e	Middle		Suffix
Address 1					
Address 2					
City		State		ZIP code	
Province (if applicable)		Country			

