

**DOMESTIC
BUSINESS CORPORATION**

STATE OF MAINE

NONCOMMERCIAL CLERK

**STATEMENT OF
APPOINTMENT or CHANGE**

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

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

Pursuant to [5 MRSA §§105, 108, & 109](#) the undersigned corporation executes and delivers the following statement of appointment and/or change of address by a noncommercial Clerk.

FIRST: ("X" all boxes that apply)

- A.** change of address
- B.** change to/of noncommercial clerk and address
- C.** change of noncommercial clerk
- D.** change in name of current noncommercial clerk

SECOND: The name and address of the clerk appearing on the record in the Secretary of State's office:

(name of current clerk)

(physical street address, city, state and zip code)

(mailing address if different from above)

THIRD: Complete this Item as follows based on your selection in Item First:

- A.** The new address of the noncommercial clerk (provide address information only);
- B.** The name and address of the **new** noncommercial clerk, who must be a Maine resident (provide name and address information);
- C.** The name of the **new** noncommercial clerk, who must be a Maine resident (provide name only); **OR**
- D.** The new name of the current noncommercial clerk (provide name only).

(name of new noncommercial clerk or new name of current noncommercial clerk)

(physical street address, not a P.O. Box – city, state and zip code)

(mailing address if different from above)

