



**Division of Corporations,  
State Records and  
Uniform Commercial Code**

New York State  
**Department of State**  
**DIVISION OF CORPORATIONS,  
STATE RECORDS AND  
UNIFORM COMMERCIAL CODE**  
One Commerce Plaza  
99 Washington Ave.  
Albany, NY 12231-0001  
www.dos.ny.gov

## CERTIFICATE OF CHANGE OF

\_\_\_\_\_  
*(Insert Name of Foreign Corporation)*

Under Section 1309-A of the Business Corporation Law

**FIRST:** The name of the corporation as it appears on the index of names in the Department of State is: \_\_\_\_\_.

*(Complete the following section only if the corporation has agreed to use a fictitious name in New York State.)*

The fictitious name the corporation has agreed to use in New York State is:

\_\_\_\_\_.

**SECOND:** The jurisdiction of incorporation of the corporation is:

\_\_\_\_\_.

**THIRD:** The date on which the corporation was authorized to do business in New York State is:

\_\_\_\_\_.

**FOURTH:** The change(s) effected hereby are: *(Check appropriate statement(s))*

The county location, within this state, in which the office of the corporation is located, is changed to: \_\_\_\_\_.

The address to which the Secretary of State shall forward copies of process accepted on behalf of the corporation is changed to read in its entirety as follows:

\_\_\_\_\_.

The corporation hereby: *(Check one)*

Designates \_\_\_\_\_  
as its registered agent upon whom process against the corporation may be served.

The street address of the registered agent is:

\_\_\_\_\_.

Changes the designation of its registered agent to:

\_\_\_\_\_  
The street address of the registered agent is:

Changes the address of its registered agent to:

Revokes the authority of its registered agent.

**X**

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

\_\_\_\_\_  
(Name of Signer)

\_\_\_\_\_  
(Title of Signer)

## CERTIFICATE OF CHANGE OF

\_\_\_\_\_  
(Insert Name of Foreign Corporation)

Under Section 1309-A of the Business Corporation Law

Filer's Name and Mailing Address:

\_\_\_\_\_  
Name:

\_\_\_\_\_  
Company, if Applicable:

\_\_\_\_\_  
Mailing Address:

\_\_\_\_\_  
City, State and Zip Code:

### NOTES:

1. The name of the corporation and the date it was authorized to conduct business in New York State provided on this certificate must exactly match the records of the Department of State. The information should be verified on the Department of State's website at [www.dos.ny.gov](http://www.dos.ny.gov).
2. This form was prepared by the New York State Department of State. You are not required to use this form. You may draft your own form or use forms available at legal stationery stores.
3. The Department of State recommends that all documents be prepared under the guidance of an attorney.
4. The certificate must be submitted with a **\$30** filing fee.

\_\_\_\_\_  
For Office Use Only