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Michael Watson
SECRETARY OF STATE

**POST OFFICE BOX 136**
**JACKSON, MS 39205-0136, 601-359-1633**

# Commercial Registered Agent Termination Statement
## § Section 79-35-7 Miss Code Ann (1972)

**Individuals and entities currently listed as a Commercial Registered Agent with the Mississippi Secretary of State may terminate that status by filing this form and paying the $50 fee. Termination is effective 31 days after acceptance of this filing by the Mississippi Secretary of State. A separate form must be submitted for each location if the Commercial Registered Agent has more than one office.**

**Name of registered agent:** _____

**Street address of registered agent:** _____

**Mailing address of registered agent (if different):** _____

**Telephone number:** _____

**Name of contact individual if agent is a company:** _____

**Commercial registered agents e-mail address:** _____

**By signing this Commercial Registered Agent Termination Statement, I affirm that I am authorized to request removal of the above named registered agent from the Commercial Registered Agents listing with the Mississippi Secretary of State. I understand that filing this form terminates the agency of this commercial registered agent with every entity it represents. I further affirm that notice of this termination has been sent to each entity**

**Signature:** _____ **Date:** _____

**Printed name:** _____ **Title:** _____

**Mail completed form with the fee of $50 to SECRETARY OF STATE, PO BOX 136, JACKSON, MS 39205-0136. For assistance contact a customer service representative at (800) 256-3494. Visit our website at www.sos.ms.gov for forms and instructions.**