



FOREIGN REGISTRATION AMENDMENT

State Form 56365 (R6 / 01-26)

Diego Morales
SECRETARY OF STATE
BUSINESS SERVICES DIVISION
 302 West Washington Street, Room E018
 Indianapolis, IN 46204
 Telephone: (317) 234-9768
INBiz.in.gov

- INSTRUCTIONS:**
1. Use 8½" x 11" white paper for attachments.
 2. Please **TYPE** or **PRINT LEGIBLY** in **INK**. Print all forms single sided.
 3. For additional forms please visit in.gov/sos/business/division-forms
 4. Make check or money order payable to the Secretary of State.
 5. Submit original completed paperwork and payment to: 302 West Washington Street, Room E-018, Indianapolis, IN 46204.

REQUIREMENTS: Applicants must submit a certificate of existence issued by the proper authority within the last sixty (60) days.

NOTE: A registered foreign entity must submit a copy of this form if there is any change in the name of the entity, the entity's jurisdiction of formation, the street address of the entity, or the registered agent information.

INFORMATION CONTAINED ON THIS PAGE IS NOT PART OF THE PUBLIC RECORD.

Name of business
E-mail address of business (SOS use only)

RETURN DOCUMENTS TO:

Name		
Street address, line 1		
Street address, line 2		
City	State	ZIP code
Telephone number ()	E-mail address (If different from above – SOS use only)	





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Indiana Code 23-0.5-5-4
23-0.5-9-27

FILING FEE: \$30.00

The undersigned, desiring to amend the registration of a foreign entity on file with the Secretary of State pursuant to the provisions of Indiana Code 23-0.5-5-4, executes the following Foreign Registration Amendment.

ARTICLE I – ENTITY INFORMATION

Current legal name of the entity

Current alternate name of the entity (if any)

Date the foreign entity registered with the Secretary of State's office (month, day, year)

Current entity type

Current jurisdiction of formation

ARTICLE II – NEW ENTITY INFORMATION

Please complete only the sections pertaining to the information that has changed.

Please note: If the entity changing its name is a Foreign Master LLC, Articles of Designation changing the name of each associated Series must be submitted to the Secretary of State's office along with this Amendment.

New legal name of the entity

New alternate name of the entity

New jurisdiction of formation

If the foreign entity is a Foreign Limited Liability Company that wishes to become a Foreign Master LLC, please provide the name of the Foreign Master LLC. (The name must include the words Limited Liability Company-S, L.L.C.-S or LLC-S.)

Name of the Foreign Master LLC

The Master LLC is authorized to designate one or more series.

If the foreign entity is a Foreign Master LLC that wishes to become a Foreign Limited Liability Company, please provide the name of the Foreign Limited Liability Company and check the box below. (The name must include the words Limited Liability Company, L.L.C. or LLC.)

Name of the Foreign Limited Liability Company

☐ This Limited Liability Company removes the statement from its Registration Statement that it is authorized to designate one or more series. By filing this Amendment, all associated series to the Master LLC will be dissolved.

New street address:

☐ All business is conducted remotely from a governing person's residence, and the principal office address is a contact address. (If you check this box, leave the following line blank and include State Form 9900382 with your filing)

Number and street

City

State

ZIP code

ARTICLE III – REGISTERED AGENT INFORMATION

To determine if your Registered Agent is a Commercial Registered Agent (CRA), go to INBIZ.in.gov.

Provide either commercial registered agent or noncommercial registered agent information below.

<input type="checkbox"/> Commercial registered agent	Name of registered agent <i>(Do not provide address.)</i>
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OR

<input type="checkbox"/> Noncommercial registered agent	Name of registered agent
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Address <i>(number and street) (A P.O. Box is not acceptable unless accompanied by a Rural Route number.)</i>	City	State IN	ZIP code
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(OPTIONAL) E-mail address of the registered agent at which the registered agent will accept electronic service of process

☐ By checking the box, the Signator(s) represent(s) that the Registered Agent named in the Foreign Registration Amendment has consented to the appointment of Registered Agent.

In Witness Whereof, the undersigned duly authorized representative of the foreign entity executes this Foreign Registration Amendment and verifies, subject to penalties of perjury, that the statements contained herein are true, this _____ day of _____, 20_____.

Signature

Printed name

Title