

Secretary of State Office  
500 E Capitol Ave  
Pierre, SD 57501  
(605)773-4845  
[corpinfo@state.sd.us](mailto:corpinfo@state.sd.us)

## COMMERCIAL REGISTERED AGENT REGISTRATION

Please Type or Print Clearly in Ink

**FILING FEE: \$100** payable to SECRETARY OF STATE

The undersigned submits the following statement for the purpose of being listed as a Commercial Registered Agent in the State of South Dakota.

1. The name of the individual or entity \_\_\_\_\_

2. If an entity the jurisdiction of organization \_\_\_\_\_

3. If an entity the type of entity \_\_\_\_\_

4. The street address in South Dakota of the place of business to which service of process may be delivered

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
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Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4
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5. Optional statement regarding alternate means of accepting service of process

\_\_\_\_\_

6. Phone number \_\_\_\_\_

7. Fax number \_\_\_\_\_

8. E-mail address \_\_\_\_\_

9. Web address \_\_\_\_\_

The above referenced individual or entity intends to be in the business of serving as a Commercial Registered Agent in the State of South Dakota.

Dated \_\_\_\_\_

\_\_\_\_\_  
(Signature of an authorized officer)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Title)