



Nevada Registered Agent Service™

The *PREFERRED* choice in Registered Agents since 1991

SERVICE AGREEMENT

This form is a fill able PDF. Please enter the information into the boxes below and save this file to your computer before returning it. If you are having trouble saving this file, try printing to a PDF file.

Name of represented business entity (The legal **NAME** of your business)

This is a **new** Nevada Business

This is an **existing** Nevada Business changing Registered Agent

This is a **corporation**

This is an **LLC, LP or LLP**

This is a **nonprofit**

Address of business

<input type="text"/>	<input type="text"/>
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Phone

Fax

Business email

Name, business address and business telephone number of a natural person who is an officer, director, employee or designated agent of the entity who is authorized to receive communications from the Registered Agent and is deemed the designated communications contact for the Business Entity.

If the Business Entity **chooses** to maintain its records with a Custodian of Records, the name and street address of a **natural person** who shall serve in such capacity. (**Optional**)





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Email address for transmittal of all documents

Emergency / Alternate contact name, email address and phone number

Fax number in case of undeliverable email

For Nevada Registered Agent Service™ to adequately perform the duty of a Nevada Registered Agent, provide immediate notification, and to comply with Nevada State Law, it is important that you always keep the Nevada Registered Agent Service™ informed of the current contact information for your business entity.

By signing this service agreement, the Business Entity represented by the authorized signer below hereby agrees to notify Nevada Registered Agent Service™ with any change in the information listed above within sixty (60) days of any such change.

Your signature below constitutes acceptance of this document, acknowledgement that you have read and understand it as well as confirmation that you have reviewed, understood and performed due diligence regarding the suitability of this service agreement for your specific purpose.

Your signature below constitutes that to the best of your knowledge and under penalty of perjury, the information submitted and contained in this service agreement is correct and you acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.





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CERTIFICATION

By checking this box and affixing my signature below, I agree that I am the authorized representative of the entity listed above. I understand and I give my consent that all official mail, notices from the Nevada Secretary of State, legal notices and service of process will be accepted, opened and forwarded by our service as your registered agent. I will furnish all requested information necessary to allow you to conduct our registered agent responsibilities in accordance of the laws and statutes of the State of Nevada.

By checking this box and affixing my signature below I acknowledge that I have read and agree to Nevada Registered Agent Service™ [Privacy Policy](#) and [Terms Of Use](#), as posted at <http://www.nevada-ra.com/>. I agree to the fee of \$39 per year for the services of a Nevada Registered Agent and I understand that fees charged by the State of Nevada for any forms filed on my behalf by Nevada Registered Agent Service™ will be an additional charge over and above the \$39 yearly fee. I acknowledge that the \$39 yearly fee only includes forwarding of mail received that is able to be scanned electronically and that any mail forwarded other than by electronic means will be an additional charge.

Authorized Representative

Date

Printed Name and Title

