# CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT BY INSURER

## **INSTRUCTION SHEET**

## 1. Change in the address of the registered office

- Must be a street address. Post Office Box is not acceptable
- Must be an Oregon address

# 2. Change in the registered agent

- Must be an Oregon resident
- Insurance Commissioner is not acceptable

#### 3. **Insurer Name**

Must be full legal corporate name of the insurance company
>ABC Ins Co is not acceptable for ABC Insurance Company, Inc.

## 4. Corporate Seal

- Must be affixed
  - ➤If the insurance company does not have a Corporate Seal, provide an affidavit so stating and attach to the form

# 5. **Notary**

- Form must be notarized
- Must include notary seal

Please send a self-addressed, stamped envelope, addressed to the designated registered agent, and an additional copy of the Change of Registered Agent form.

#### **\*\*NOTE\*\***

- ♦ If the form is incomplete it will be returned to be completed properly prior to information being posted.
- ♦We do not automatically acknowledge the filing of the form. If an acknowledgment is required, include a self-addressed, stamped envelope when returning the completed form.