

## **REGISTERED AGENT CONTACT FORM**

Company Registering in Mississippi	
Company Name	
Principal Business Office Address	
(required)	
Telephone Number	
FAX Number	
The registered agent is required to maintain in its records the name, address and phone number of a natural person. Service of Process and Legal Correspondence Should Be Sent to:	
	n riocess and Legal correspondence should be sent to.
Company/Firm	
Contact Person's Name	
(Must list a natural person)	
Address	
(Must be a physical address. No P. O. Box)	
City, State, Zip	
Phone Number	
FAX Number	
Email Address	
Tax and Renewal Notices Address	
	(Leave blank if all three addresses are the same)
Address	
City, State, Zip	

PAYMENTS:

Return this completed form with annual fee of \$125.00 to the address listed below. Payment must be received within 10 days.

## **QUESTIONS / NEED ASSISTANCE:**

Please contact us with any questions or concerns. Our contact information is listed below.

 Print Name
 Title
 Phone Number

 Signature
 Date

 6735 I-55 S Frontage Rd, Suite 8 | Byram, MS 39272 | 601.345.1084

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