





**Wyoming Secretary of State**  
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122 W 25th Street  
Cheyenne, WY 82002-0020  
Ph. 307.777.7311  
Email: [Business@wyo.gov](mailto:Business@wyo.gov)

For Office Use Only

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## Foreign Limited Liability Company Articles of Continuance

Pursuant to W.S. 17-29-1010 of the Wyoming Limited Liability Act, the undersigned hereby submits the following Articles of Continuance:

1. Name of the limited liability company:

2. Organized under the laws of:

*(State or country)*

3. Date of organization:

*(Date – mm/dd/yyyy)*

4. Mailing address of the limited liability company:

5. Principal office address:

6. Name and physical address of its registered agent:

*(The registered agent may be an individual resident in Wyoming or a domestic or foreign business entity authorized to transact business in Wyoming. **The registered agent must have a physical address in Wyoming.** If the registered office includes a suite number, it must be included in the registered office address. A Drop Box is not acceptable. A PO Box is acceptable if listed **in addition to a physical address.**)*

Name:

Address:

*(If mail is received at a Post Office Box, please list above **in addition to the physical address.**)*

7. The limited liability company will abide by the constitution and laws of Wyoming.

8. Certification. *(Please check the box to complete the required certification.)*

I consent on behalf of the business entity to accept electronic service of process at the required email address provided on the form under the circumstances specified in W.S. 17-28-104(e).

**Signature:** \_\_\_\_\_  
*(Shall be executed by a member, manager, or other authorized individual as set forth in the operating agreement.)*

**Date:**  
*(mm/dd/yyyy)*

Print Name:

Contact Person:

Title:

Daytime Phone Number:

Email:

*(An email address is required. Email(s) provided will receive important reminders, notices and filing evidence.)*

**REQUIRED ATTACHMENT TO INCLUDE WITH THE FILING:**

A **certified copy of its original articles of organization and all amendments** currently certified within the last six (6) months by the proper officer of the state or country of formation.

A copy of the **company resolution** authorizing continuance of the Limited Liability Company into Wyoming.

Note: Please **provide evidence showing the entity has been dissolved** after the continuation into Wyoming has been completed. Copies of the dissolution are acceptable and can be emailed to [Business@wyo.gov](mailto:Business@wyo.gov) or mailed in.



## Consent to Appointment by Registered Agent

I, \_\_\_\_\_, registered office located at  
*(name of registered agent)*

\_\_\_\_\_ voluntarily consent to serve

*\*(registered office physical address, city, state, & zip)*

as the registered agent for  
*(name of business entity)*

I hereby certify that I am in compliance with the requirements of W.S. 17-28-101 through W.S. 17-28-111.

**Signature:** \_\_\_\_\_  
*(Shall be executed by the registered agent.)*

**Date:** \_\_\_\_\_  
*(mm/dd/yyyy)*

Print Name:

Daytime Phone:

Title:

Email:

*(An email address is required. Email(s) provided will receive important reminders, notices and filing evidence.)*

Registered Agent Mailing Address  
*(if different than above):*

**IMPORTANT:** If you are an existing registered agent and your existing address on record does not match what is provided on this form, a **Registered Agent Information Update** form is also required.