



**Department of Consumer & Business Services**

**Insurance Division — 4**

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**Change of Registered  
Office or Registered  
Agent by Insurer**

To the Oregon Department of Consumer and Business Services:

Pursuant to Section 731.434 of the Oregon Revised Statutes, the undersigned insurer hereby makes the following change in its designation of registered office and/or registered agent in the State of Oregon for service of process, notice, and demand:

*(Check one or both)*

Change in the address of the registered agent to:

\_\_\_\_\_  
(Address of registered office, include number, street, and ZIP)

Change in the registered agent to:

\_\_\_\_\_  
(Name of registered agent – *Cannot be Insurance Commissioner*)

As changed, the address of the insurer's registered office and the address of the business office of its registered agent are identical.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Insurer name

By \_\_\_\_\_  
Signature of president or secretary

\_\_\_\_\_  
Title

(Corporate seal)

State of \_\_\_\_\_

County of \_\_\_\_\_

Personally appeared \_\_\_\_\_ ,  
Name of officer

\_\_\_\_\_ of \_\_\_\_\_ ,  
Title Insurer name

the insurer in whose name he/she executed the foregoing instrument, and acknowledged that he/she executed the same by the authority and on behalf of said insurer; and said officer of said insurer further acknowledged that the corporate seal attached and impressed on said instrument is the corporate seal of said insurer and was affixed thereto by him/her.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary Signature

Notary public in and for the state of: \_\_\_\_\_

My commission expires: \_\_\_\_\_

*Notary Seal*