

**STATE OF SOUTH CAROLINA
SECRETARY OF STATE**

**APPLICATION FOR SURRENDER OF AUTHORITY TO DO BUSINESS IN
THE STATE OF SOUTH CAROLINA**

TYPE OR PRINT CLEARLY IN BLACK INK

Pursuant to S.C. Code § 33-15-200 the undersigned corporation hereby applies to the Secretary of State for surrender of authority to do business in the State of South Carolina, and for that purpose submits the following statement:

1. The name of the corporation is _____.
2. The corporation is incorporated under the laws of the state of _____.
3. The corporation received a certificate of authorization to transact business in South Carolina dated _____.
4. The corporation is no longer transacting business in South Carolina.
5. The corporation hereby surrenders its authority to transact business in the State of South Carolina.
6. The corporation revokes the authority of its registered agent in South Carolina to accept service of process, and consents that process in any action, suit, or proceeding based upon any cause of action arising in this State before the effective date of this application may be served on the Secretary of State.
7. The address to which the Secretary of State may mail a copy of any process against the corporation that may be served on him is _____

The corporation hereby agrees to notify the Secretary of State of any change in this mailing address

8. Unless a delayed date is specified, this application shall be effective upon acceptance for filing by the Secretary of State (See sections 33-1-230(b)); _____

Date _____

Name of Corporation

Signature

Type or Print Name and Office

FILING INSTRUCTIONS

1. Two copies of this application, the original and either a duplicate original or a conformed copy, must be filed.
2. Filing Fee (payable at the time of filing this document) - \$10.00

Return to: Secretary of State
PO Box 11350
Columbia SC 29211