

Instructions for completing Form CD 920 (Amended Annual Registration)

Important – Please Read. A limited liability company (LLC) that has already filed an annual registration in the current calendar year may file an amended annual registration to update one or more of the following information on record with the Secretary of State: registered agent's address; registered agent's name; and/or mailing address of LLC's principal office. Form CD 920 may be used for this purpose. Use of this form is optional. An amended annual registration may also be drafted pursuant to the relevant Georgia Code section (i.e. O.C.G.A. §§ 14-11-209 or 14-11-703). Form CD 920 is not intended to replace competent legal counsel. Secretary of State staff is not authorized to provide legal counsel or explain the steps necessary to successfully file an amended annual registration or to complete this form. Filers may wish to seek competent legal counsel in this matter.

Note: An annual registration must have already been filed for the entity in the current annual registration period prior to the filing of an amended annual registration in the same annual registration period. If an annual registration has not been filed in the current annual registration period, then a submitted amended annual registration will be rejected and the filer will be directed to file an annual registration.

Sections #1 – 3: Provide the LLC's information (i.e. name, control number, and entity type), and its current registered agent's name and address. This information should be consistent with the information currently on record with the Secretary of State.

Sections #4 – 6: Use these sections of the form to make changes to the LLC's registered agent's address, registered agent's name, and/or principal office address. Complete only those section(s) for which you are making changes or updates. If no changes are being made in a particular section, then leave that section blank.

Section #7: The amended annual registration must be signed by an authorized person. The signer must state the capacity in which he or she is signing. Print the legal name* of the signer.

The fee to file an amended annual registration is \$20.00. An amended annual registration may be filed online at <https://ecorp.sos.ga.gov/> or filed by paper by submitting this completed form to our office. There is a \$10.00 service charge for filing by paper.

If filing by paper, please mail or deliver the completed form along with a **\$30.00** payment (\$20.00 filing fee + \$10.00 paper filing service charge) payable to "Secretary of State" to:

Corporations Division
2 Martin Luther King Jr. Dr. SE
Suite 313 West Tower
Atlanta, Georgia 30334

* Legal name is an individual's first and last name without use of initials or nicknames. Middle names or initials may be included.



Secretary of State

OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION
2 Martin Luther King Jr. Dr. SE
Suite 313 West Tower
Atlanta, Georgia 30334
(404) 656-2817

AMENDED ANNUAL REGISTRATION
FOR LIMITED LIABILITY COMPANY

Note: In order to use this amended annual registration form, an annual registration must have already been filed for the limited liability company in this annual registration period. Amended annual registration filing fee is \$30.00 (\$20 filing fee + \$10 paper filing service charge).

1. Entity Information:

Entity Name: _____

Entity Control Number: _____

Entity Type (check one only): [] Domestic Limited Liability Company [] Foreign Limited Liability Company

2. Name of current registered agent on file with the Secretary of State:

3. Current street address and county of registered agent on file with the Secretary of State:

Address: _____

City: _____ County: _____ State: GA Zip Code: _____

4. If applicable, name* of new registered agent: _____

Email address of new registered agent: _____

5. If applicable, new street address and county of registered agent:

Address: _____

City: _____ County: _____ State: GA Zip Code: _____

6. If applicable, new mailing address of entity's principal office:

Address: _____

City: _____ State: _____ Zip Code: _____

7. I hereby certify, under penalty of law, that the above information is true and correct.

Signature of Authorized Person

Date

Print Name*

Title

* Enter individual's legal name, i.e. first and last name without use of initials or nicknames. Middle names or initials may be included.