

**APPLICATION TO APPOINT OR
CHANGE PROCESS, OFFICERS,
AND/OR ADDRESSES**

Form AAO
Rev. 9/2026



West Virginia Secretary of State
Business & Licensing Division
Tel: (304)558-8000
Fax: (304)558-8381

FILE ONE ORIGINAL (Two if you want a filed stamped copy returned to you.)

FILING FEE: \$15

Company Type

- ☐ Limited Liability Company
☐ Limited Partnership
☐ Limited Liability Partnership

- ☐ Corporation
☐ Voluntary Association
☐ Business Trust

Please contact the office for any unlisted business type

1a. The name of the business: _____

1b. Principal Office Address on Record

Street: _____

City: _____ State: _____ Zip Code: _____

1c. Domestic Home State: _____ 1d. WV Registration Date: _____

Enter only sections that need updated

2. The address of the Principal Office:

Street: _____

City: _____ State: _____ Zip Code: _____

3. The address of Street:

City: _____ State: _____ Zip Code: _____

4. WV Designated Office, If any

Street: _____

City: _____ State: West Virginia Zip Code: _____

5a. Name of Current Registered Agent: _____

☐ Check box to remove current agent.

5b. The name and WV address of a new Registered Agent for service of process, if any:

Name: _____

Street: _____

City: _____ State: West Virginia Zip Code: _____

5c. Signature of new agent: _____

6. New email address: _____

7. Identify all officers of the business who are being added or removed. Add additional pages if needed.

7a. Officer type being changed

☐ Business Trust Trustee

☐ LLC Member / Manager

☐ LLP or LP Partner

☐ Corporate Director

☐ Corporate Officer (Pres, VP, Sec, Treas.)

Officer Title: _____

Name of Current Officer to be removed:

Name of New Officer to be added:

Mailing address of Added Officer:

Street: _____

City: _____ State: _____ Zip Code: _____

7b. Officer type being changed

☐ Business Trust Trustee

☐ LLC Member / Manager

☐ LLP or LP Partner

☐ Corporate Director

☐ Corporate Officer (Pres, VP, Sec, Treas.)

Officer Title: _____

Name of Current Officer to be removed:

Name of New Officer to be added:

Mailing address of Added Officer:

Street: _____

City: _____ State: _____ Zip Code: _____

7c. Officer type being changed

☐ Business Trust Trustee

☐ LLC Member / Manager

☐ LLP or LP Partner

☐ Corporate Director

☐ Corporate Officer (Pres, VP, Sec, Treas.)

Officer Title: _____

Name of Current Officer to be removed:

Name of New Officer to be added:

Mailing address of Added Officer:

Street: _____

City: _____ State: _____ Zip Code: _____

7d. Officer type being changed

- ☐ Business Trust Trustee
- ☐ LLC Member / Manager
- ☐ LLP or LP Partner
- ☐ Corporate Director
- ☐ Corporate Officer (Pres, VP, Sec, Treas.)
- Officer Title: _____

Name of Current Officer to be removed:

Name of New Officer to be added:

Mailing address of Added Officer:

Street: _____

City: _____ State: _____ Zip Code: _____

7e. Officer type being changed

- ☐ Business Trust Trustee
- ☐ LLC Member / Manager
- ☐ LLP or LP Partner
- ☐ Corporate Director
- ☐ Corporate Officer (Pres, VP, Sec, Treas.)
- Officer Title: _____

Name of Current Officer to be removed:

Name of New Officer to be added:

Mailing address of Added Officer:

Street: _____

City: _____ State: _____ Zip Code: _____

8. Contact Person for Filing:

Name: _____

Phone Number: _____

9. Signature Information (see legal notice on next page regarding signatures)

Print Name: _____ Capacity: _____

Signature: _____ Date: _____

Important Legal Notice Regarding Signature

Corporations/Voluntary Associations/Business Trusts/Unincorporated Nonprofit Associations/Limited Partnerships - Per West Virginia Code §31D-1-129. Penalty for signing false document.

Any person who signs a document he or she knows is false in any material respect and knows that the document is to be delivered to the Secretary of State for filing is guilty of a misdemeanor and, upon conviction thereof, shall be fined not more than one thousand dollars or confined in the county or regional jail not more than one year, or both.

Limited Liability Companies/Limited Liability Partnerships – Per West Virginia Code §31B-2-209.

Liability for making a false statement in filed record. If a record authorized or required to be filed under this chapter contains a false statement, one who suffers loss by reliance on the statement may recover damages for the loss from a person who signed the record or caused another to sign it on the person's behalf and knew the statement to be false at the time the record was signed.

Important Note: This form is a public document. Please do NOT provide any personal identification information on this form such as social security numbers, bank account numbers, credit card numbers, tax identification or driver's license numbers.



West Virginia Secretary of
State Business & Licensing
Division Tel: (304)558-8000
Fax: (304)558-8381
Website: www.wvsos.gov

CUSTOMER ORDER REQUEST

INCLUDE THIS FORM WITH YOUR FILING

Name of Business on Filing: _____

Contact for Filing:

Name: _____

Phone: _____

Email: _____

Order Description: Please Identify the type of filing or request being made.

EXPEDITING SERVICE OPTIONS*

- ☐ Standard (5-10 business days) - No additional cost
- ☐ In-Person Same Day -\$25 in addition to filing fee
- ☐ Next Business Day - \$25 in addition to filing fee
- ☐ 2 Hour - \$250 in addition to filing fee
- ☐ 1 Hour - \$500 in addition to filing fee

Expediting Service is NOT AVAILABLE for:

-Dissolutions / Withdrawals of Corporations,
Voluntary Associations, or Business Trusts
-Credit Service Organization Registrations
-Trademark Filings
-Sole Proprietor / General Partnership Trade
Names

*Fees apply to each business. Time frame Indicates when the filing will be completed and registered in the Secretary of State database.

Return Information:

Method of Return:

- ☐ Hold for Pick Up
- ☐ Email: _____
- ☐ Specialty Carrier (Please provide return envelope & prepaid label)
- ☐ USPS Mail (standard)

Attention: _____

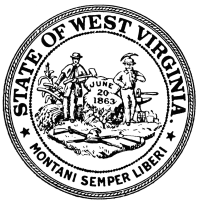
Street: _____

City: _____ State: _____ Zip code: _____

Please Mail Filing to Any Secretary of State Hub Office

WV One Stop Business Center
13 Kanawha Blvd. W.
Suite 201
Charleston, WV 25302

North Central WV Business Hub
153 West Main Street
Suite G - Third Floor
Clarksburg, WV 26301



Secretary of State
Capitol Building Charleston,
WV 25305 Phone: (304)
558-6000 Website:
sos.wv.gov

Next Business Day, 2-Hour, and 1-Hour Expedite Service Guidelines

NEXT BUSINESS DAY EXPEDITE SERVICE

The Secretary of State offers a 24-hour expedite service on most business organization filings processed by this office. If you choose to utilize this service, please enclose with your filing the additional expedite fee. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. You must mark the document with your **"24-HOUR EXPEDITE"** request. If using a cover letter, note that you are requesting 24-hour expedited service, and include your telephone number and return information. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made. This office *does not* fax confirmation of a 24-hour expedite.

The fee for 24-hour handling is \$25.00 in addition to the usual fee for service. Please consult our fee schedules for the appropriate fee. If you require assistance, please contact this office.

Time Constraints: Under most circumstances, each filing submitted receives same day filing date and may be picked up in the office by the end of the same business day. Filings to be mailed the next business day if received by 2:00 pm of receipt date and no later than the 2nd business day if received after 2:00 pm. Expedite period begins when filing or service request is received in this office in acceptable fileable form.

2-HOUR EXPEDITE SERVICE

The Secretary of State offers a 2-hour expedite service on most filings processed by this office. If you choose to utilize the 2-hour expedite service, please enclose with your filing an additional \$250.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 2-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 2-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-HOUR EXPEDITE SERVICE

The Secretary of State offers a 1-hour expedite service on most filings processed by this office. If you choose to utilize the 1-hour expedite service, please enclose with your filing an additional \$500.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 1-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 1-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-Hour and 2-Hour Time Constraints: Each filing submitted for either 1-hour or 2-hour expedite receives same day filing date and will be acknowledged by fax or e-mail within expedite service time. Failure to indicate method of acknowledgment (fax or e-mail) or to provide a correct fax number or e-mail address may prevent the Secretary of State from acknowledging the filing of such documents. Filings may be picked up within the expedite service period. Filings to be mailed will be mailed out no later than the next business day following receipt. Expedite period begins when filing or service request is received in this office in fileable form.

The Secretary of State reserves the right to extend the expedite period in times of extreme volume, staff shortages or equipment malfunction. These extensions are few and will rarely extend more than a few hours.