Print Form

Clear Form

FORM X-11
11/2025

Nonrefundable Filing Fee: $100.00*
See instructions.

State of Hawaii
Department of Commerce and Consumer Affairs
Business Registration Division
335 Merchant Street, Room 201
Mailing Address: P.O. Box 40, Honolulu, HI 96810
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BusinessRegistrations.com

COMMERCIAL REGISTERED AGENT LISTING STATEMENT

(Section 425R-5, Hawaii Revised Statutes)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. Attachments to this form may be used, if necessary.

The undersigned certifies as follows:

1. **The applicant registering to become listed as a Commercial Registered Agent (CRA) is** (select one and complete, as applicable)**:**

☐ An Entity

Entity Name

State, Province, or Country of Formation/Incorporation/Organization

☐ An Individual

First Name

Last Name

2. **The entity type of the CRA is a/an** (select one)**:**

☐ Profit Corporation ☐ Nonprofit Corporation ☐ General Partnership ☐ Limited Partnership

☐ Limited Liability Partnership* ☐ Limited Liability Limited Partnership ☐ Limited Liability Company

*(If LLP is selected, General Partnership must also be selected, and the fee must be paid.)

☐ Other (explain):

3. **The street address of the place of business of the CRA in State of Hawaii to which service of process and other notice and documents being served on or sent to the entity or entities represented by it may be delivered to is:**

Country: USA

Address (Number and Street)

Address Line 2 (optional)

City | State: Hawaii | Zip Code

4. **The individual or entity named above is in the business of serving as a commercial registered agent in Hawaii.**

I/We certify under the penalties of Section 414-20, 414D-12, 425-13, 425-172, 425E-208 and 428-1302, Hawaii Revised Statutes, as applicable, that I/we have read the above statements, that I/we am/are authorized to make this change, and that the above statements are true and correct to the best of my/our knowledge and belief.

Signed this _____ day of _____, _____

Type/Print Entity Name

OR

Type/Print Individual's First Name | Last Name

Type/Print name and office title, capacity in which person signs.

Signature

Type/Print Entity Name

OR

Type/Print Individual's First Name | Last Name

Type/Print name and office title, capacity in which person signs.

Signature

The statement must be signed and certified by the individual or on behalf of the entity to become listed as a commercial registered agent. See instructions on next page.

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INSTRUCTIONS FOR PREPARING AND FILING A COMMERCIAL REGISTERED AGENT LISTING STATEMENT

Section 425R-5, Hawaii Revised Statutes (HRS)

Statement must be typewritten or printed in **black ink** and must be **legible**. Attachments may be used, if necessary, and must be typed or printed in **black ink** on 8.5″ x 11″ white bond paper, single-sided. The statement must be signed and certified by the **registered agent**. If the registered agent is an entity, an authorized official must sign, as follows: if the applicant is a **partnership**, at least one general partner must sign on behalf of the partnership; for a **corporation**, by at least one corporate officer on behalf of the corporation; and for a **limited liability company**, by at least one manager of a manager-managed company or by at least one member of a member-managed company, or in the case of a foreign limited liability company, by a person who is authorized or required to sign a record under the laws of its jurisdiction of organization. All signatures must be in **black ink**. Submit statement together with the appropriate fee(s).

Item 1. Indicate whether the applicant to become a Commercial Registered Agent (CRA) is an entity or an individual. If the applicant is an entity, state the entity name and state, province, or country of formation, incorporation, or organization of the registered agent. If the applicant is an individual, state the individual's first name and last name.

Item 2. Check the appropriate box to indicate the entity type of the CRA. If "Other" is selected, please explain.

Item 3. State the complete street address of the place of business of the CRA in the State of Hawaii to which service of process and other notice and documents being served on or sent to the entity or entities represented by it may be delivered to.

Item 4. (Prefilled, required statement.) The individual or entity named above is in the business of serving as a commercial registered agent in Hawaii.

Filing Fees: The fee for filing the Commercial Registered Agent Listing Statement is **$100.00*** and is not refundable. Payments made by cash, check, or credit card (VISA, MasterCard, Discover, Diners Club, or JCB) are accepted. Make checks payable to DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS. Dishonored check fee is $25.00.