

OFFICE OF THE ATTORNEY GENERAL
MARYLAND DIVISION OF SECURITIES
200 Saint Paul Place
Baltimore, Maryland 21202-2020
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Securities@oag.state.md.us

FILLABLE FORM ISR: APPLICATION FOR RENEWAL OF ISSUER AGENT REGISTRATION
(ELECTRONIC SIGNATURES ACCEPTABLE)

Submit via NASAA's EFD selecting UFT or First-Class Mail

RENEWAL FILING FEE: \$50.00

If not submitting via EFD, please make check payable to: "Office of the Attorney General"

Name of Agent: _____

Social Security No.: _____

MD Issuer Agent Registration No.: _____

Home Address: _____

Address Line 2: _____

Telephone Number: _____ Cell Home

Issuer Name _____ and MD File No.: _____

Issuer's Contact Name: _____

Issuer's Address: _____

Address Line 2: _____

Issuer's Telephone Number: _____ Issuer's Email Address: _____

On behalf of the Agent and pursuant to §11-406(b) of the Maryland Securities Act, the undersigned, being a duly authorized officer or general partner or sole proprietor of the Issuer, represents that to the best knowledge, information and belief of the Issuer, there has been no change in the information contained in the Agent's application for registration currently in effect, except as explained in the attached supplement.

By: _____ Date: _____

Name: _____

Title: _____

THIS FORM MUST BE RECEIVED ON OR BEFORE DECEMBER 31 , 2023