

Instructions: Statement Curing Delinquency

Use these instructions when completing a Statement Curing Delinquency pursuant to [§ 7-90-904](#) of the Colorado Revised Statutes (C.R.S.). The required form/cover sheet must be used when submitting the document for filing. Mistakes may have legal consequences: review the information provided carefully. The Colorado Secretary of State's office cannot provide legal advice. Questions should be addressed to the user's legal, business or tax advisor(s). Only provide information that is required or permitted to be included in the document. Information included in the document must be in English, typewritten or machine printed, and must state the name and address of at least one individual causing the document to be delivered for filing. In order to obtain a copy of the filed document or access additional information, including Frequently Asked Questions (FAQs), visit our Web site, www.sos.state.co.us.

Instructions

Note: If the pre-filled information is incorrect and cannot be changed on the screen, the appropriate form must be submitted for filing to change or correct the information. Pre-filled fields are noted below.

ID Number: The ID Number field will be pre-filled with the 11 digit number assigned to the record by the Colorado Secretary of State. This information cannot be changed.

Entity Name: The Entity Name field will be pre-filled with the name of the entity exactly as such name is recorded by the Colorado Secretary of State's Office. This information cannot be changed.

Jurisdiction: The Jurisdiction field will be pre-filled with the entity's jurisdiction of formation exactly as such jurisdiction is recorded by the Colorado Secretary of State's Office. This information cannot be changed.

Registered Agent Information: The registered agent name and address fields may have been pre-filled. If the fields are pre-filled, the information can be changed or deleted.

Statement Regarding Registered Agent Consent. The registered agent must consent to being appointed as the registered agent for the entity. The statement regarding registered agent consent is required by [§ 7-90-701 \(3\)](#), C.R.S.

Registered Agent Name:

Provide the name of the registered agent. A registered agent must be one of the following: an individual age 18 years or older whose primary residence or usual place of business is in Colorado, a domestic entity having a usual place of business in Colorado, or a foreign entity authorized to transact business or conduct activities in Colorado that has a usual place of business in Colorado. When providing the registered agent's name only list the individual name or the entity name of the registered agent. Do not provide both names. For legal authority, refer to [§ 7-90-701](#), C.R.S.

Registered Agent Street Address. Provide the street name and number, including the suite, unit or apartment number, if applicable, of the registered agent's street address. The city and ZIP code must also be provided. The state field will be pre-filled with "CO". If the registered agent is an entity, provide the street address of the registered agent's usual place of business in Colorado. If the registered agent is an individual, provide the street address of either the registered agent's primary residence in Colorado or registered agent's usual place of business in Colorado. The street address must be a physical address and **cannot** be a post office box.

Registered Agent Mailing Address. If the registered agent's mailing address is different from the registered agent's street address, or mail cannot be delivered to the street address, provide an address in Colorado where mail may be delivered. The state field will be pre-filled with "CO". A city and ZIP code must also be provided.

Mailing Address same as Street Address: If the mailing address is the same as the street address, or is no longer valid, remove the mailing address by deleting all of the pre-filled mailing address information and select the "Yes" button.

Principal Office Address: The principal office address fields may have been pre-filled. If the fields are pre-filled, the information can be changed or deleted.

Principal Office Street Address: Provide the street name and number, including the suite, unit or apartment number, if applicable. The city, state, and ZIP code must also be provided. Any address outside of the United States must include the country and, if applicable, the province.

Example: 123 N. Main Street, Apt 101
Denver, Colorado 80202

Principal Office Mailing Address: If the mailing address is different than the street address, or mail cannot be delivered to the street address, provide the address, including the city, state and ZIP code where mail is to be delivered. Any address outside of the United States must include the country and, if applicable, the province.

Example: P.O. Box 854
Lakewood, Colorado 80228.

Mailing Address same as Street Address: If the mailing address is the same as the street address, or is no longer valid, remove the mailing address by deleting all of the pre-filled mailing address information and select the “Yes” button.

Additional Information: Select the “No” button if no additional information will be attached. Select the “Yes” button if additional information is permitted or required by law to be included in the document. After selecting “Submit” at the bottom of the online form, the Manage Attachments page will appear and allow for the attachment of the additional information as a plain text, PDF, or JPEG document. [Click here for information regarding attachments.](#)

Delayed Effective Date (optional): The effective date of this document may be delayed up to 90 days after filing with the Colorado Secretary of State. The document becomes effective at twelve midnight Mountain Time on the date specified. However, a time of day other than twelve midnight may be selected. Mountain Time controls the filing date and time. For legal authority, refer to [§ 2-4-109](#) and [§ 7-90-304](#), C.R.S.

Notice: This section describes the legal authority for filing this document. Refer to [§ 7-90-301.5](#), C.R.S. for more information.

Individual Causing Delivery: Pursuant to [§ 7-90-301.5](#), C.R.S., each individual causing the document to be filed is responsible for complying with the applicable statutes. Provide the last name and first name of at least one individual causing the document to be delivered for filing. A middle name and suffix are optional. The mailing address, including the city, state and ZIP code, must be provided. Any address outside of the United States must include the country and, if applicable, the province.

Example: Smith, John
123 N. Main St., Apt 101
Denver, Colorado 80122

Additional Individuals Causing Delivery: Select the “YES” button to include an attachment with the names and addresses of additional individuals causing the document to be filed. The attachment must provide the name of each additional individual, including their last name and first name. A middle name and suffix are optional. Also provide the mailing address, including the city, state and ZIP code. Any address outside of the United States must include the country and, if applicable, the province.

Disclaimer: These instructions, and the related form/cover sheet, are not intended to provide legal, business or tax advice, and are offered as a public service without representation or warranty. While the related form is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form. Questions should be addressed to the user’s attorney.