

Elaine F. Marshall, Secretary of State

**Solicitor Resignation Statement 2016**

**Solicitor Information**

Complete Name of Solicitor:

Complete Name of Firm or Organization of Solicitor, (if Applicable):

Complete Name and Title of Authorized Representative of Solicitor:

Mailing Address of Authorized Representative of Solicitor:

Physical Address of Authorized Representative of Solicitor:

Weekday Telephone for Authorized Representative of Solicitor:

Fax No. E-Mail Address:

**Statement of Resignation**

I hereby resign as a Solicitor effective \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2016.

Signature of Solicitor Date

**Preparer Information**

Signature of Preparer (if other than Solicitor) Printed Name of Preparer