



**Secretary of State
Business Programs Division**

Business Entities

1500 11th Street, Sacramento, CA 95814
P.O. Box 944260, Sacramento, CA 94244-2600

Submission Cover Sheet

Instructions:

- Complete and include this form with your paper submission. **This information only will be used to communicate in writing about the submission, if needed.** This form will be treated as correspondence and will not be made part of the filed document.
- Make all **checks or money orders** payable to the Secretary of State.
- In person submissions (excluding Statements of Information): \$15 handling fee; do not include a \$15 handling fee when submitting documents by mail.
- Standard processing time for submissions to this office is approximately 5 business days from receipt. All submissions are reviewed in the date order of receipt with online submissions given priority. For updated processing time information, visit www.sos.ca.gov/business/be/processing-dates.

Optional Copy and Certification Fees:

- If applicable, include optional certification fees with your submission.
- For applicable certification fee information, refer to the instructions of the specific form you are submitting.

Contact Person: (Please type or print legibly)

First Name: _____ Last Name: _____

Phone (optional): _____

Entity Information: (Please type or print legibly)

Name: _____

Entity Number (if applicable): _____

Address: _____

Comments: _____

Instructions for Completing the Statement By Unincorporated Association (Form UA-100)

Legal Authority: Statutory filing requirements are found in California Corporations Code section [18200](#). All statutory references are to the California Corporations Code, unless otherwise stated.

- After the Statement by Unincorporated Association has been filed, the association may at any time file a new statement superseding the last previously filed statement. If the new statement does not designate an agent for service of process, the filing of the new statement operates to revoke a process agent previously designated.
- The Statement by Unincorporated Association expires 5 years from December 31 following the date of filing with the Secretary of State, unless previously superseded by the filing of a new statement.

Fees: The fee for filing the Statement by Unincorporated Association is \$25.00. A non-refundable \$15.00 special handling fee is applicable for processing documents delivered in person (drop off) at the Sacramento office. The preclearance and/or expedited filing of a document *within a guaranteed time frame* can be requested for an additional non-refundable fee in lieu of the special handling fee. For detailed information about preclearance and expedited filing services, go to www.sos.ca.gov/business/be/service-options.htm. The special handling fee or preclearance and expedited filing services are not applicable to documents submitted by mail. Check(s) should be made payable to the Secretary of State.

Copies: Upon filing, we will return one (1) plain copy of your filed document for free, and will certify the copy upon request and payment of an additional \$5 certification fee.

Complete the Statement by Unincorporated Association (Form UA-100) as follows:

- Item 1.** Enter the name of the unincorporated association.
- Item 2.** If the unincorporated association has a principal office address in California, enter the complete address, including zip code, and proceed to Item 4 (leave Item 3 blank.) If the unincorporated association has no principal office address in California, leave Item 2 blank and proceed to Item 3.
- Item 3a.** If the unincorporated association has no principal office in California, enter the complete address of the unincorporated association to which the Secretary of State shall send any notices required under Sections [18210](#) and [18215](#).
- Item 3b.** If different from Item 3a, enter the mailing address of the unincorporated association.
- Item 4.** An agent for service of process **may** be designated by the unincorporated association if the association has a principal office address in California, and **must** be designated by the unincorporated association if the association has no principal office address in California. The person named as agent must be a resident of California or a corporation that has filed a certificate pursuant to Section [1505](#). To confirm that you are providing the exact name of the registered agent, go to our Business Search online at bizfileOnline.sos.ca.gov. If an individual is designated as agent, both Items 4 and 5 must be completed. If a corporation is designated, complete Item 4 and proceed to Item 6 (do not complete Item 5). An Agent for Service of Process is an individual or corporation designated by an unincorporated association to accept service of process if the unincorporated association is sued.
- Please note:** An unincorporated association cannot name itself as agent for service of process. Further, no domestic or foreign corporation may file pursuant to Section 1505 unless the corporation is currently authorized to engage in business in California and is in good standing on the records of the Secretary of State.
- Item 5.** If an individual is designated as the agent for service of process, enter the agent's business or residential address in California. Please do not enter "in care of" (c/o) or abbreviate the name of the city. Please do not enter an address if a corporation is designated as the agent for service of process.
- Item 6.** If the unincorporated association filed a previous statement, enter the file number issued by the Secretary of State. If the last statement filed by the association has expired, or no prior statements have been filed, leave Item 6 blank and proceed to Item 8.
- Item 7.** If the unincorporated association filed a previous statement under a name other than the name entered in Item 1, enter the former name of the association exactly as it is of record with the Secretary of State. If the name has not changed, or the last statement filed by the association has expired, or no prior statements have been filed, leave Item 7 blank and proceed to Item 8.
- Item 8.** Type or print the name and title of the person completing this form.

