

NOTICE OF APPOINTMENT OF REGISTERED AGENT AND REGISTERED AGENT'S STATEMENT

(29 Del. C. § 6086)

JUS-TPM2

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Please type or print in permanent ink:

Sign, date and return original to:

**Office of the Attorney General of the State of Delaware
Department of Justice
Tobacco Litigation & Enforcement Unit
Carvel Office Building
820 N. French Street, 5th Floor
Wilmington, Delaware 19801**

The undersigned Non-Participating Manufacturer ("NPM"), _____ hereby appoints _____ as its registered agent. Said registered agent is authorized to receive service of process on behalf of the NPM. The NPM agrees to do the following: (1) provide notice to the Office of the Attorney General of the State of Delaware ("Attorney General") at least thirty (30) calendar days prior to termination of the authority of the registered agent; and (2) provide proof to the satisfaction of the Attorney General of the appointment of a new agent at least five calendar days prior to the termination of the existing agent appointment. The NPM further agrees that if the agent terminates its agency appointment, the undersigned shall provide notice to the Attorney General of the appointment of a new agent.

I hereby certify and declare that all of the statements and information contained in this Notice of Appointment, including but not limited to any accompanying statements or attachments herewith, are true and complete and that I am a person authorized to bind the NPM making this Notice of Appointment either under the laws of Delaware or of the jurisdiction where the manufacturer resides or is organized. Failure to file this form is a basis for removal of the undersigned NPM and its Brand Families from the Directory.

THIS NOTICE OF APPOINTMENT must be signed and dated in the presence of a notary public.

Signature of authorized representative for NPM: _____

Authorized Representative (Print Name) _____

Title: _____

Principal Place of Business (physical address): _____

STATE OF _____)

COUNTY OF _____)

COUNTRY OF _____)

On _____, before me, _____, personally appeared _____, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Signature _____

My commission expires: _____

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NAME AND ADDRESS OF DELAWARE STATE REGISTERED AGENT:

NAME: _____

Street Address (*Required – Must be within the state of Delaware*): _____

P.O. Box (*Optional*): _____

City and State: _____

Telephone: _____ Facsimile Number: _____

E-mail address: _____

I consent to serve as the Registered Agent in the state of Delaware for the above-named NPM, pursuant to Title 29, Section 6086 of the Delaware Code. I understand it will be my responsibility to receive Service of Process on behalf of the NPM; to forward mail to the NPM; and to immediately notify the Office of the Attorney General if I resign or change the office address of the Registered Agent.

THIS NOTICE OF APPOINTMENT must be signed and dated in the presence of a Notary Public.

Signature: _____ Date: _____

Print Name: _____

Title: _____

STATE OF _____)

COUNTY OF _____)

COUNTRY OF _____)

On _____, before me, _____, personally appeared _____, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Signature _____

My Commission expires: _____