

LLC Intake Form

Your Name _____
Address _____
Address _____
City _____ State _____ ZIP Code _____

1. What do you want the name of your LLC to be?

First Choice _____

Second Choice _____

Third Choice _____

2. What will be the LLC's address? (i.e. the place where all of the corporate records will be kept) This can be a private mailbox, but not a US Post Office Box or PO BOX.

Address _____

Address _____

City _____ State _____ ZIP Code _____

3. Who will be the LLC's Registered Agent? A Registered Agent is an individual/entity who is an agent for service of process on the LLC. This is whom papers would be served upon if there is a lawsuit. If you are not sure, we can act as the LLC's Registered Agent at no charge for the first year, an additional fee of \$149/year would apply for completing the annual updates with the state and serving as the registered agent.

Name _____

4. Address of the registered agent. You can use the same address as the LLC's address.

Address _____

Address _____

City _____ State _____ ZIP Code _____

5. What are the goals of the LLC?

6. Do you want to be taxed as an “S” Corporation or Partnership?

7. Who are going to be the LLC’s Members (owners)? Members can be individuals or entities like a corporation or another LLC.

Name _____
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Name _____
Address _____
Address _____
City _____ State _____ ZIP Code _____

Name _____
Address _____
Address _____
City _____ State _____ ZIP Code _____

8. Based on the number of Member’s, how do you want to divide each Member’s ownership share in the LLC?

Name _____ Percentage _____

Name _____ Percentage _____

Name _____ Percentage _____

Name _____ Percentage _____

9. What will each Member contribute to the LLC? (property, money, services)

Name _____ Contribution _____

Name _____ Contribution _____

Name _____ Contribution _____

Name _____ Contribution _____

10. Do you want the LLC to be Member-Managed or Manager-Managed? Generally more flexibility is available if the entity is Manager Managed.

_____ Manager Managed

_____ Member Managed