

**R. Zebulon Law, Esq.  
A Professional Corporation**

**LLC FORMATION CHECKLIST**

1. **Proposed Names of LLC:**
  1. \_\_\_\_\_
  2. \_\_\_\_\_
2. **Fictitious Name:** \_\_\_\_\_ **Counties** \_\_\_\_\_
3. **Is this business a continuation of any earlier business?** \_\_\_\_\_
4. **Address and principal place of business** \_\_\_\_\_
5. **Phone No.** \_\_\_\_\_ **Fax No.** \_\_\_\_\_
6. **Principal business activity** \_\_\_\_\_
7. **State of formation** \_\_\_\_\_
8. **Fiscal year (12/31)?** \_\_\_\_\_
9. **Date business started** \_\_\_\_\_
10. **Tax basis:**    **Corporation**         **Partnership**
11. **Agent for Service of Process name and address?** \_\_\_\_\_  
(No P.O. Boxes. If agent is a corp., then it must have filed a 1505 statement. List corp name only, no address.)
12. **Primary bank** \_\_\_\_\_
13. **Name, address and phone of CPA** \_\_\_\_\_

**MEMBER / MANAGER INFORMATION**

- |                            |  |
|----------------------------|--|
| 1. <b>Name:</b> _____      | <b>Member</b> <input type="checkbox"/> <b>Manager</b> <input type="checkbox"/> |
| <b>Address:</b> _____      | <b>SSN:</b> _____  |
| _____                      | <b>Percentage</b> _____  |
| <b>Telephone No.</b> _____ | <b>Consideration</b> _____   |
|                            |  |
| 2. <b>Name:</b> _____      | <b>Member</b> <input type="checkbox"/> <b>Manager</b> <input type="checkbox"/> |
| <b>Address:</b> _____      | <b>SSN:</b> _____  |
| _____                      | <b>Percentage</b> _____  |
| <b>Telephone No.</b> _____ | <b>Consideration</b> _____   |
|                            |  |
| 3. <b>Name:</b> _____      | <b>Member</b> <input type="checkbox"/> <b>Manager</b> <input type="checkbox"/> |
| <b>Address:</b> _____      | <b>SSN:</b> _____  |
| _____                      | <b>Percentage</b> _____  |
| <b>Telephone No.</b> _____ | <b>Consideration</b> _____   |
|                            |  |
| 4. <b>Name:</b> _____      | <b>Member</b> <input type="checkbox"/> <b>Manager</b> <input type="checkbox"/> |
| <b>Address:</b> _____      | <b>SSN:</b> _____  |
| _____                      | <b>Percentage</b> _____  |
| <b>Telephone No.</b> _____ | <b>Consideration</b> _____   |