# LIMITED LIABILITY COMPANY (LLC)

Meeting Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signing Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ File No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## **basic company information**

|  |  |  |
| --- | --- | --- |
| Name of LLC |  | |
| Physical Business Address | Street |  |
| City/State/Zip |  |
| Mailing Address (if different) | Street |  |
| City/State/Zip |  |
| County of LLC |  | |
| Description of Operations |  | |
| Telephone |  | |
| Fax |  | |
| Email |  | |
| Professional license No. (if any) |  | |

## **OWNERS**

|  |  |  |
| --- | --- | --- |
| Name(s) | Social Security Number  (need at least one for the Tax ID Number) | % of Ownership |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

## **MANAGERS (INCLUDE SUBSEQUENT IF THIS IS A SINGLE MEMBER LLC)**

|  |  |  |
| --- | --- | --- |
| Name(s) | Social Security Number | % of Ownership |
| Initial |  |  |
| Subsequent |  |  |

## **BUSINESS preferences**

|  |  |  |
| --- | --- | --- |
| Company Trade Name (if any) |  | |
| A trade name is any name, other than the legal name, under which a company operates | | |
| Registered Agent Name/Address | Name |  |
| Street |  |
| City/State/Zip |  |
| The Registered Agent must have a physical address located in Georgia and is listed with the Secretary of State to receive service of process notices.  If you would like my office to serve as your registered agent, my annual fee is $300.00 | | |

### **Additional information**

USE ADDITIONAL PAPER IF NECESSARY

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