



Questions? - Contact Cynthia D. Prather at cdp@chancellorconfirm.com or 470.705.0399 ext. 101

LLC Order Form

**** spaces may be left blank if you need guidance**

LLC Contact Information			
Preferred Name:		Alternate Name:	
Contact Name			
Shipping Address			
LLC Bus. Address (if different)			
Phone Number			
Fax Number			
Email address			
LLC Data			
Business Description (10 words or less)			
"Perpetual" or Date of Termination			
Annual Meeting Date			
Fiscal Year End			
Principal Officer's Contact		Contact numbers	
Legal Name & Title:			Phone:
Social Security Number:			Fax:
LLC Officers (can be same person for all positions) [handles day-to-day operations/management of business]			
	Name	Address	
President:			
Vice President:			
Secretary:			
Treasurer:			
LLC Members: (owners of the corporation) *Provide SSN for each if electing "S-Corporation" status			
	Name	Address	Social
Member #1			
Member #2			
Member #3			
LLC Member contributions (list the items/services contributed and fair market value of contribution by each member)			
	Item/Service/Contribution	Fair Market Value	
Member #1			
Member #2			
Director #4			
Registered Agent (leave blank if MyCorporation is chosen as R.A.) *Registered Agent required if out of state or not present/available 9am -5pm M-F			
Name:			
Address:			
Tax ID (Employer Identification Number [EIN])			
Does corporation have employees?	If yes, how many employees in next 12 mos.?		
	What date will first wages be paid (estimate):		
Credit card information		Name on card:	
Credit card number:		Expiration Date:	CVV Code:
Billing address:			
Signature:			