

Orr & Reno

Professional Association

LIMITED LIABILITY COMPANY WORKSHEET

1. Name of Limited Liability Company
 1st Choice: _____
 2nd Choice: _____

2. Limited Liability Company Address, including telephone number:

 Telephone Number: _____

3. Purpose: _____

4. Name and address of registered agent: _____

5. Date of Dissolution: _____

6. Is the management vested in a manager or managers? _____

7. Members and Manager(s):

Member	Manager	Address	SSN	Percentage Interest	Initial Capital Contribution

8. Decisions concerning tax elections under IRC to be made by: _____

9. Who will prepare tax returns? _____

10. Annual statements showing profits and losses will be prepared by:

11. Fiscal Year End: _____
12. Number of Employees expected within the next 12 months: _____
13. Date expected for first wages, if any: _____
14. Conflict of Interest? _____
15. Representation Letter? _____
16. Accountant Information:
- Name: _____
- Address: _____
- _____
- Telephone: _____
- FAX: _____
17. Other issues to be addressed (i.e., trademark or domain name registrations, deadlock breaking provisions, buy-sell provisions): _____
- _____
- _____

Notes: