

## LIMITED LIABILITY COMPANY QUESTIONNAIRE

Name of Client: \_\_\_\_\_  
Name of Firm/Company: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City, State and Zip Code: \_\_\_\_\_

1. State of Limited Liability Company: \_\_\_\_\_

2. Name of Limited Liability Company (Submit three names in order of preference)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. States in which Limited Liability Company will qualify:

\_\_\_\_\_  
\_\_\_\_\_

4. Specific business purpose:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Are the affairs of the limited liability company to be managed by manager(s)? \_\_\_\_\_ If so the name(s), address(es) and telephone numbers are:

Managers' Names	Addresses (street address required by most states)	Telephone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Organizers' Names	Addresses (street address required in most states)	Telephone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. The address at which the records (as required by statute) will be kept are (**Bridge Service Corp CAN NOT PROVIDE THIS ADDRESS**):

\_\_\_\_\_

8. The principal place of business of the Limited Liability Company will be:

\_\_\_\_\_  
\_\_\_\_\_

9. NRAI our affiliate will be the registered agent and office, if not, the agents name and address are:

\_\_\_\_\_  
\_\_\_\_\_

10. In New York, NRAI our affiliate will provide the post office address to receive process served on the Secretary of State, if not, the address is:

\_\_\_\_\_

13. The duration of the limited liability company is: \_\_\_\_\_

14. Any special provisions: \_\_\_\_\_

\_\_\_\_\_

15. Will a corporate kit be needed? \_\_\_\_\_

16. Where shall the following communications be sent for the Limited Liability Company:

COMPANY NAME AND ADDRESS	COUNSEL NAME AND ADDRESS

SERVICE OF PROCESS ADDRESS	TAX & ROUTINE CORRESPONDENCE	RENEWAL INVOICING ADDRESS
<p>To:</p> <p>___ Company Address Attention: Telephone #: Fax #:</p> <p>___ Counsel Address Attention: Telephone #: Fax#:</p> <p>(Attach any Special Instructions)</p>	<p>To:</p> <p>___ Company Address Attention: Telephone #: Fax #:</p> <p>___ Counsel Address Attention: Telephone #: Fax#:</p>	<p>To:</p> <p>___ Company Address Attention: Telephone #: Fax #:</p> <p>___ Counsel Address Attention: Telephone #: Fax#:</p>