

CHECKLIST FOR LLC

PART 1: CLIENT INFORMATION

Client's Name (First, Last):

City:

 Primary Phone: Home Cell

Designated Address:

 State: Zip:

 Secondary Phone: Home Cell

Name of LLC (Three choices in order of preference):

What Does This Company Do?

¹Name of Registered Agent (Person receiving official notifications)

Registered Address of LLC:

City:

City:

 State: Zip:

PART 2: LLC MEMBER INFORMATION

*If more than 2 Members, please contact the office to receive an additional members sheet.

 Managing Member Non-Managing Member

 PLEASE PROVIDE A COPY OF DRIVERS LICENSE FRONT AND BACK,
 FOR EACH MEMBER WITH 25% OR MORE OWNERSHIP.

SSN:

Birthdate

Client's Name (First, Last):

Address:

City:

 State: Zip:

Email:

% of Ownership:

 Managing Member Non-Managing Member

Client's Name (First, Last):

SSN:

Birthdate

Address:

City:

 State: Zip:

Email:

% of Ownership:

PART 3: PAYMENT INFORMATION

 Credit Card #:

 Expiration Date: / /

 Name on Card:

 Security Code:

 Address on Card:

 City:

 State:

 Zip Code:
Please bill my credit card for the items checked:
 LLC Organization & State Filing Fee S-Corp Election: Form 2553 Postage BOI Reporting Fee

 Total to be Billed: \$

FEE(S) & OTHER ADDITIONS

LLC Organization: \$395.00

State Filing Fee: *UT \$59.00

S-Corp Election: \$30.00

Postage to Mail Binder: \$20.00

* For any other state, the state filing fee varies from state to state.

Signature _____

Print Name _____

Date _____

¹ If you want MainStreet to be the Registered Agent, the cost is \$100.00 per year.

² A copy of the drivers license is required to comply with the **Beneficial Ownership Information Reporting (BOI Reporting)** regulation that is explained with accompanying letter attached to the LLC Checklist.