

# LIMITED LIABILITY COMPANY FORMATION QUESTIONNAIRE

1. Name of Company (list 3 choices in order of preference in case the first one is not available):

First Choice	
Second Choice	
Third Choice	

2. Would you like for Cari Rincker of Rincker Law, PLLC to accept service of process on your behalf from the Illinois Secretary of State?

Yes or No

If No, then what individual will be the registered agent? \_\_\_\_\_  
What is his/her address?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Principal business location address: \_\_\_\_\_

4. Names of owners and ownership interest:

Name	Address	Tax ID	Ownership Interest

5. Will the LLC be managed by members or by a manager?

Member-Managed or Manager-Managed (recommended in most situations)

If manager-managed, who will be the manager? \_\_\_\_\_

6. When would you like for the LLC to be created?

Date of Filing or Specific Date?

If Specific Date then what date: \_\_\_\_\_

7. What is the duration of the company? Perpetual or some other limitation with time?

8. When would you like to hold the Annual Meeting each year?

First Tuesday in March (or something similar) \_\_\_\_\_

Specific date \_\_\_\_\_