

LLC CAPITAL EXPRESS ORDER FORM

The preparation of Articles of Organization is a service available to attorneys only. Please include attorney's name and bar number. We cannot be responsible for errors if this document is not legible and completely filled out appropriately.

PLEASE TYPE OR PRINT NEATLY

Attorney's Bar# _____

Telephone Number _____

Name of Firm _____

Name of Attorney _____

Contact Person _____

Must Choose one: Limited Liability Company Professional Limited Liability Company

* Professional Limited Liability Companies must list a specific nature of business below.

Must Choose one: Certified Copy (\$155.00)

Photo Copy (\$125.00) (Photo copies will be sent if not specified)

Please list a name for the LLC

(PRINT OR TYPE THE EXACT NAME AS YOU WOULD LIKE IT TO APPEAR IN YOUR ARTICLES OF ORGANIZATION. PLEASE SPECIFY SPACES, PUNCTUATION AND CAPITALIZATION)

Principle Address:

* Address must be a street address, P.O. Boxes are acceptable for Mailing Address only.

* If Limited Liability Company is a manager-managed company, check here

Name and Address of Manager(s) or Managing Member(s): (must have complete street address and zip code)

Registered Agent: P.O. Boxes are NOT acceptable, a valid Florida street address will be needed. If you would like Capital Connection, Inc. to serve as your registered agent you will be charged an annual fee of \$165.00.

Special Notes/Restrictions:

Corporate Kit: YES NO

Return Documents Via: Fed Ex _____ DHL _____ UPS _____ Regular Mail _____

Fax Documents: YES NO (If yes, number _____)

SHIP TO ADDRESS:

BILL TO ADDRESS:

FAX THIS ORDER FORM TO (850) 222-1222