Client interview checklists for LLC formation, outfit and EIN

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Easy instructions for the fillable PDF form

This Adobe PDF form lets you electronically fill in the form to print out, reuse, or attach to an email for submission. Visit www.LawyersAidService.com for the most up-to-date version. You must have Adobe Reader version 8 or later for this document to function correctly. Download it here.

The electronic version of the checklist features **key questions**. As you answer the key questions (those having a \rightarrow), other appropriate questions become active for you. Change your key choices, and different questions become active. Inactive questions will have no active blue boxes.

Add your further instructions and overflow text in the box on page 5.

Instructions box:

If filling out electronically, hover your mouse over many blue selection boxes to view a pop-up with information about that question. The last page of the checklist automatically totals your order to make it easier to mail payment simultaneously.

When finished, you can submit your order form by mail, by printing and faxing, or by email. There is also a "Clear form" button on the last page.

Covered in these checklists

Limited Liability Company formation

Section A lets you set up a new Texas LLC or PLLC. Lawyer's Aid will check the name availability, create the Certificate of Formation on archive bond, advance the filing fees and submit filing to the State, and help you resolve any problems on the spot. For other entities and filings, see our website, or call (888) 474-2112.

Professional registered agent service

On question 4 of Section A, you can designate Lawyer's Aid as the company's registered agent. For peace of mind about handling of legal notices, including lawsuits, a professional registered agent service is recommended. If you choose Lawyer's Aid, we'll follow up to get your contact instructions.

Limited Liability Company Outfit

In Section B you can choose a Deluxe or Standard Company Outfit. Outfits contain embossing seal, minutes, company agreement, 20 membership interest certificates, transfer ledger, tax guidance, and extensive forms on archive bond. The black vinyl three-ring binder shows the company name in gold on its spine, and stores in a matching slipcase. In the Deluxe Outfit, all text is custom-typed with your information seamlessly filled in. The Standard Outfit comes with blanks to fill in.

IRS Employer Identification Number (EIN)

Section C allows you to order an EIN for an LLC. Lawyer's Aid deals with the IRS instead of you to get the federal tax ID. You receive the EIN on the SS-4 form usually within 24-48 hours, by your choice of email or fax, then mail. If the principle officer's Social Security Number is not provided, acquisition of the EIN will likely take 2+ weeks.

A	LLC IORMATION CHECKIIST (For other entities and filings, see our website			
1.	The company will be governed by its:			
2.	Proposed company name and two alternatives. LLC names must include <u>limited liability company</u> or <u>limited company</u> or an abbreviation. Professional LLC names must include <u>professional limited liability company</u> or an abbreviation. Use exact punctuation, capitalization, and spacing.			
L				
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L				
3.	Purpose (Check one. A nonprofit purpose is permitted.):			
	LLC: "any lawful purpose" (recommended)			
	non-standard clause included in instructions box on page 5			
	PLLC: "the practice of" (profession)			
	NP LLC: IRS 501(c)(3) plus any other purpose clause attached in instructions box on page 5 non-501(c)(3) purpose clause attached in instructions box on page 5			
4.	a. Registered agent and registered office street address:			
	Lawyer's Aid Service, Inc., 505 West 15th, Austin, TX 78701 RA Benefit			
	Other registered agent (PO box not allowed. If rural, street description plus PO box is allowed.):			
	Registered Agent name:			
	Street address:			
	City: State: Zip code:			
	b. The RA has consented to serve. (required)			
	c. Also file RA's signed written consent. (optional free form at LawyersAidService.com/RA)			
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5.	Initial mailing address (out-of-state address or PO box allowed):			
6.	Number of initial Managers or Members, whichever will govern: (1 is minimum).			
	Names and complete addresses (attach additional pages if needed, or use Instructions Box on page 5):			
7.	What turnaround time and format?			
	Fastest: form-style filing, in 1-5 business days			
	Looks most professional: classic legal-document style, in 2-6 business days			
8.	Add optional special clauses to the Certificate? (Check all that apply. Call or email for exact text.) IRS related: Plan to file for Sub S status Designated under 1244 stock			
9.	Add your custom clause to the Certificate? No Yes, text attached on page 5			
8 	A key question activates other questions appropriate to your choice. (continued			

b. Limited Liability Con	npany Outht chec	KIISt
10. a. This order is for an: LLC ou	itfit with formation	LLC outfit only
b. Type of company outfit:		
☐ Deluxe Customized Fill	in 1-20 (items 3-9 and 12-2	20 may be left blank)
Standard Fill	in 1, 2, 10, and 11. Defaul	ts used for 3, 19, and 20.
11. Membership interest certificates wi	ll have a signature line for:	
Secretary (default) Sec. &	Pres. Member	Manager Other:
12. Initial principal place of business of	of the LLC (complete street a	ddress is best):
13. Organizational meeting:		
Date: Time:	Location (City, State	e):
Meeting Chair:	Meeting Secr	etary:
14. Officers:		
President:	Secretary:	
VP:	-	
Other officers (names & titles):		
15. Initial Members and the units of me		
(a Member's proportional interest is	the number of his or her units	•
Member names and mailing addresses		Number Nature and value of units of contribution
Wiember maries and maring addresses		of units of contribution
16. Banking Resolution (optional, but re		
		itle of each person to be authorized to
company depository:		mpany accounts:
17. Any custom clauses attached (\$15 J	fee)? No Yes, add	to: Agreement Minutes
18. Formation date (if known):	Filing nun	nber (if known):
19. Options:	Statutory defaults	Add'l Options (Deluxe only)
a. One vote per:	Member	Unit of membership interest
b. Votes to amend the agreement:	ALL	\square a majority \square 2/3 \square 3/4
c. Votes to admit new members:	ALL	\square a majority \square 2/3 \square 3/4
d. Votes to admit assignees as member		\square a majority \square 2/3 \square 3/4
e. Profit, loss, distributions allocated		tribution Units of membership interest
20. Blanks in outfit (attorney or client f	<u> </u>	underlines (default) spaces
A key question activates other question		
A Key question activates offer question	ns appropriate to your choice.	(continued)

C. Checkist for IRS Employer Identification Number (EIN)
To register the new company with the IRS, a federal requirement, check the box to the left. All fields are required.
Lawyer's Aid Service obtains your EIN, usually the same day or the day after the LLC is formed, and reports it to you immediately. You receive Form SS-4 by mail for your records. To order an EIN for any other kind of business entity, call (888) 474-2112 or see our website.
21. LLC name (if already known):
22. Street address for tax purposes:
23. Mailing address, if different:
24. Number of members:
25. Principal member's full name as it appears in Social Security records:
Social Security Number: Title: President Other:
26. LLC tax classification (choose one): Default: Single-member LLC is taxed as sole proprietorship Multi-member LLC is taxed as a partnership C Corporation (must file IRS Form 8832 within 12 months to elect this classification) S Corporation (must file IRS Form 2553 within 75 days to elect this classification)
27. Closing month of accounting year: December (recommended) other:
28. Fill in this box only if there will be employees in the next 12 months:
Highest number of employees expected in next 12 months:
Agricultural: Household: Other: Other:
Earliest date wages may be paid: Do you expect to pay \$5,000 or less in wages next calendar year (Jan. – Dec.)?
29. Type of business or activity (e.g. healthcare, construction, transportation, food service, real estate, retail, etc.):
30. Specific merchandise sold or produced, or services provided:
31. Business phone:
32. A Lawyer's Aid Service representative is authorized as third-party designee to obtain the EIN.
33. Notify me of EIN by: fax phone email (Original is mailed with bill.)
Fax, phone, or email address:
A key question activates other questions appropriate to your choice. (continued)

D. Order form, prices, and contact information

Prices *include* all state filing fees, expedite fee, sales tax, and mail/shipping costs. Prices may change without notice.

1. To order, select the services and	d outfit desired:	
□ LLC Formation Get the quickest turnaround time possible Lawyer's Aid checks for name availability drafts and files the Certificate; obtains the Acknowledgment of Filing; phones, faxes, or emails you with the Acknowledgment (your choice); and mails it with the file-marked Certificate. To form LLC or PLLC	customized with your title and footer. Very agreement and organ with your custom professional, saves includes 20 deluxe or ledger, an embossin forms, binder and slaw Customized Outfit for Standard LLC Outfle Like Customized Customized text for Standard Outfit for Late Custom clause on Late Custom clause text at Long name on LLC 40+ characters in control Residential address	documents and forms ur company name in every We fill in the company nizational meeting minutes information. Looks most you hours. This Outfit certificates, interest transfer g seal, minutes, agreement, ipcase. r LLC or PLLC
2. Total for the above services and		
3. Submit to Lawyer's Aid Service		
Email to maindesk@ Print and fax to LawyersAidService.com (888) 474-4218 4. Submit simultaneous payment:	Call (888) 474-2112 to place your order.	Guarantee Unless you are thoroughly satisfied with your
By credit card via online portal: www.LawyersAidService.com/Payment	Or mail to: PO Box 848 Austin, TX 78767-0848	Company Outfit, Lawyer's Aid Service will replace it or send you a full refund.
Attorney's name:	Phone:	
Contact name:	Phone:	
Firm name:	Fax:	
Street address:		
City: State:	Zip: C	ountry:
Email:	Type or sign your name b sending simultaneous pay	

E. Your further instructions

Use this box to

- Enter any special instructions you have about this order, including overflow text, special clauses, or queries about other services.
- Share your comments, complaints, or suggestions. How can we make things better?
- Tell us how to contact you about this order, if you have a preference.
- Let us know how you heard about Lawyer's Aid. An ad? A person?

If, when faxing or mailing in the form, any text overflows the box, please attach it.