Client interview checklist for an LLC company outfit

Instructions

This Adobe PDF form for ordering an LLC kit (also called outfit) lets you fill in the form onscreen or print it and fill it out by hand. You can submit the form to Lawyer's Aid by email, by printing and faxing, or by phone. The form can be saved on your computer, copied, and reused.

The electronic version of the checklist features **key questions**. Answering key questions (those with a \vdash) makes other appropriate questions become active for you and shows active blue boxes.

Each LLC kit contains a company agreement, minutes, embossing seal, 20 membership interest certificates, transfer ledger, tax guidance, and extensive forms on archive bond paper. The black vinyl three-ring binder shows the company name in gold on its spine, and stores a matching dust-proof slipcase. In the Deluxe Kit (for attorneys only), all text is custom-typed with your information seamlessly filled in. The Standard Kit comes with blanks to fill in.

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Ā	. Checklist for LLC company kit				
1.	Type of company outfit: Deluxe Custom (for attorneys only): Standard: Fill in all items. (Items 6-17 may be left blank.) Fill in items 1-5 only. (Defaults used for 16 and 17.)				
2.	Company name. Use exact punctuation, capitalization, and spacing.				
<u>L</u>					
3.	The company will be governed by its:				
4.	Add optional special clauses to the interest certificates? (Check any that apply. Call for exact text.) Designated under 1244 stock Buy-sell agreement Other (custom language attached)				
5.	Membership interest certificates: Number of signature lines on the membership interest certificates (4 is maximum): Please specify the title for each signature line (e.g. Secretary, President, Member, or Manager):				
6.	Purpose (professional LLCs only): "for the practice of"				
7.	Registered agent and registered office street address: Registered agent: Registered office street address:				
	Registered office city: State: TX Zip code:				
8.	Initial governing person(s) Number of initial members or managers, whichever will govern (1 is minimum): Names (use Instructions on on page 2 for overflow):				
9.	Initial principal place of business of the LLC (complete street address is best):				

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10. Organizational meeting:	Date:	Time:	City:			
Chair:		Secretary:				
11. Officers:						
Pres.:		Sec.:				
VP:		Treas.:				
Other (name and title):						
12. Initial members and the units of membership interest issued to each at the organization						
Member name and mailing	address		Number of units	Nature and value of contribution		
13. Banking Resolution (opt a. Name and address of becompany depository:		b. Name and tit	le of each person	n to be authorized to		
14. Any custom clauses attact 15. Formation date (if known	` ,	☐ No ☐ Yes, add to:	Agreement	☐ Minutes		
·	*		,	-14)		
16. Blanks (for attorney or control of the second of the s	LC's agreement: embers: ees as members:	Statutory defaults Member ALL ALL ALL Agreed value of contribution	Unit of me a majority a majority a majority a majority	embership interest 2/3		
B. Your further	instruction	nc if anv				
D. Tour further		15, 11 dily .				

C. Order form, prices, and contact information

Prices include all sales tax and mail/shipping costs. Prices may change without notice.

1. To order, select th	e outfit and	add-ons desired:			
Deluxe Customized LLC Seamlessly typed doc customized with your contitle and footer. We agreement and organizati with your custom inform company agreement, 20 interest transfer ledge minutes, forms, binder an Customized Outfit for LLC Standard LLC Outfit Like Customized Outfit, preprinted text for you to Standard Outfit for LLC of	uments and formpany name in exiting the componal meeting minutation. Outfit included deluxe certificates, embossing of slipcase. Cor PLLC \$ but with blanks in fill in.	Custom clause to or entered into Solutes and UPS surcharge a LLC Outfit to reserve Call (888) 474-2	Custom clause on LLC Outfit Custom clause text or documents attached or entered into Section B on page 2		
2. Total for the above			\$		
			··· [4]		
 3. Submit to Lawyer Email to maindesk@ LawyersAidService.com 4. Submit simultaneo By credit card via online pwww.LawyersAidService.com 	Print and fax to (888) 474-4218 ous payment portal:	Call (888) 474-2112 to place your order	Guarantee Unless you are thoroughly satisfied with your Company Outfit, Lawyer's Aid Service will replace it or send you a full refund.		
Attorney's name:		Phone:			
Contact name:		Phone:			
Firm name:	name: Fax:				
Street address:					
City:	State:	Zip:	Country:		
Email:		, i	Type or sign your name below to confirm you are sending simultaneous payment (<u>required</u>)		