

**LIMITED LIABILITY COMPANY QUESTIONNAIRE**

1. The name you wish to use for the Limited Liability Company?

2. An alternate name for your Limited Liability Company, should your first choice not be available.

3. The type of business your Limited Liability Company intends to conduct?

4. Please specify here IF this is a Professional Limited Liability Company. \_\_\_\_ Some professions have specific rules and regulations governed by their board. Please check with your governing board regarding compliance in forming a Professional Limited Liability Company.

5. The **street** address AND telephone for the Limited Liability Company.

Street address \_\_\_\_\_

City, State and Zip code \_\_\_\_\_

Telephone number ( \_\_\_\_ ) \_\_\_\_\_

6. The name and street address for the statutory agent for the Limited Liability Company. The individual **must reside in the state of Arizona, provide a street address, and EMAIL ADDRESS**. It cannot be a post office box. Please refer to [www.Strategicpnts.com](http://www.Strategicpnts.com) if you have questions regarding statutory agents.

a. \_\_\_\_\_

Name \_\_\_\_\_

Street address \_\_\_\_\_

City, State and Zip code \_\_\_\_\_ EMAIL: \_\_\_\_\_

8. Provide the name(s) and address for each person who will serve as a member or manager of the Limited Liability Company.

\*If an entity will be a Member or Manager, please provide the state where the entity was formed, and who is authorized to sign on behalf of the entity.

\* **Indicate whether the LLC will be  Member Managed or  Manager Managed.**

1. \_\_\_\_\_  Member  Manager

Name \_\_\_\_\_

Street address \_\_\_\_\_

City, State and Zip code \_\_\_\_\_

2.	_____	<input type="checkbox"/> Member	<input type="checkbox"/> Manager
	Name		
	_____		
	Street address		
	_____		
	City, State and Zip code		
3.	_____	<input type="checkbox"/> Member	<input type="checkbox"/> Manager
	Name		
	_____		
	Street address		
	_____		
	City, State and Zip code		
4.	_____	<input type="checkbox"/> Member	<input type="checkbox"/> Manager
	Name		
	_____		
	Street address		
	_____		
	City, State and Zip code		
*Please list additional members at the bottom on the questionnaire, if needed.			

If this Limited Liability Company is being formed for investment purposes, and you wish for deeds to be prepared to convey interest to the LLC, please advise. There is an additional fee to PREPARE AND RECORD Deeds of \$150.00 per Deed.

Thank you for taking the time to complete the questionnaire. If after completing this questionnaire you have additional questions, please do not hesitate to contact me.

I look forward to working with you.

Regards,

Lisa "Kriss" Tonge, AZCLDP 80925  
 Strategic Points Document Preparation, PLLC  
 480-220-6647 (cell)  
[kriss@strategicpnts.com](mailto:kriss@strategicpnts.com) (email)