



Full Legal Name: _____ Email Address: _____

Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Type of Business Desired (Corporation, Partnership, LLC, Non-Profit): _____

Any other state in which you want the business to do business: _____

Desired effective date of formation of Business: _____

First Choice of Business Name: _____

Second Choice of Business Name: _____

Please provide a general description of the Business (i.e. goods, services, profession, etc.):

Address of Registered Office if different from Principal Place of Business:

If using a Trade Name, please provide name and states in which you wish to use this Trade Name:

Business Mailing address if different from Registered Office Address:

Full Names of all officers you wish to elect, if applicable, with their appropriate title next to their names. (i.e. President, Vice President, etc.):

Who shall serve as your Registered Agent (to accept service of process)?

Address of Principal Place of Business (You are not required to designate a Principal Place of Business):
