USA Corporate Services Inc.

NEW JERSEY LLC ORDER FORM



19W 34th Street, Suite 1018, New York, NY 10001 7432 or 212-239-5050 Fax: 212-239-5317 E-Mail: info@usa-corporate.com

Filone. 600-651-7452 of 212-255-3650				
Billing Address: (must match credit card)	Ship to: (fill in if different from "Billing Address")			
Contact:	Name:			
Firm:	Address:		_	
Address:	City:	State:	Zip:	
City:Zip:				
Phone:Fax:				
E-mail:				
Proposed company names, in order of preference:	The Limite	ed Liability Company is to be	managed by:	
1	One or more Members Name:			
2	Address:			
3				
Name and address of the Registered Agent in New Jersey (USA Corporate Services can provide if needed)	One or more Managers Name: Address:			
	Purpose of the Limited Liability Company: Standard, General purpose:			
	☐ Other specific purpose to be included:			
		Item	Fees	
		NJ LLC Package	\$601.00	
Method of Payment (check one):		Prepare & File		
☐ Check or Money Order Enclosed		Operating Agreement		
☐ Please Charge the following credit card		Certificate of Incumbency		
☐ Visa ☐ MasterCard ☐ American Express		Membership Certificates		
	-	Tax ID		
Credit Card Number Expiration	n Date	Shipping		
Card Verification Number:		Additional Services (please check)		
		Registered Agent - 1 Year	\$175.00	
Print and Sign the name of the authorized cardholder		Company Seal + Shipping	\$44.00	
*NYS Residents must pay sales tax on company outfit and shipping. ** Please only select one operating agreement - 2 page or 10 page.	.	Total Due		
** Please only select one operating agreement - 2 page or 10 page.		I otal Due		