USA Corporate Services Inc.

NEW YORK LLC TOTAL PACKAGE ORDER FORM



Shipping

19W 34th Street, Suite 1018, New York, NY 10001 Phone: 800-891-7432 or 212-239-5050 Fax: 212-239-5317 E-Mail: info@usa-corporate.com				
Billing Address: (must match credit card)	Ship to:	Ship to: (fill in if different from "Billing Address")		
Contact:	Name:			
Firm:	Address:			
	City:	State:	Zip:	
Address:				
City:State:Zip:				
Phone:Fax:				
E-mail:				
Proposed company names, in order of preference:	The Limited Liability Company is to be managed by:			
1	One or more Members Name:			
2	Address:			
3				
Complete Military World Control of the Artist Control of the Artis		_		
County within New York State where the office is to be located:	One or more Managers Name:			
	Address:			
Service of process address "mailing address" of the new				
company:	Purpose of the Limited Liability Company:			
	Standard, General purpose:			
	☐ Other specific purpose to be included:			
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		Item	Fees	
Method of Payment (check one):		NY LLC Total Package Price	\$1244	
☐ Check or Money Order Enclosed ☐ Please Charge the following credit card ☐ Visa ☐ MasterCard ☐ American Express		Prepare & File		
		Publication Fees (Albany County)		
Credit Card Number Expiration Card Verification Number:		Operating Agreement		
	Date	Membership Certificates Registered Agent		
		Change County/Address		
		Tax ID		

Print and Sign the name of the authorized cardholder

^{*}NYS Residents must pay sales tax on company outfit and shipping.

^{**} Please only select one operating agreement - 2 page or 10 page.