



BURTON | LAW
LLC

Limited Liability Company Formation Questionnaire

1. **Name** (This will be the name of your new company and it must be distinct and distinguishable from any existing LLC in Wisconsin. Please list your ideas below and I will perform a search with the State of Wisconsin to confirm the name is available. If you need suggestions on a name, please discuss with me and I will provide suggestions.)
- A. First Choice: _____
- B. Second Choice: _____

2. **Name of Registered Agent** (This is the person who is designated to receive all official mail on behalf of the LLC (Ex: from the State of Wisconsin or IRS) as well as accept service of process if the LLC is ever sued. Most people name one of the members as the initial Registered Agent).

Name of Registered Agent: _____

3. **Address of Registered Office** (This is the address the company designates as their official address where they receive mail and can receive service of process in a legal proceeding. If you name yourself or another member as Registered Agent you would likely list your home address. If you have an office address you can list it here.)

4. **Would you like to be Member Managed or Manager Managed?** If you plan to name one or two people to manage the LLC, while other people hold ownership interest in the LLC but are not active in the business, then I would recommend a Manager Managed LLC. If only one or two people are members of the LLC and both plan to be active in the business, then member management is likely appropriate. If you choose member management, then any member can bind the company (through contracts, deeds, signatures, etc.), so I generally recommend member management only for LLCs with a

small amount of members who are all active in the management of the business and who can be trusted. Please indicate your choice below:

Member Managed _____

Manager Managed _____

5. Name and Address of Each Member:

1) _____

2) _____

Client Name: _____

Client Address: _____

Client Phone: _____

Client Email: _____

By completing this form, and signing this authorization, I authorize Attorney Thomas B. Burton to electronically file Articles of Organization with the State of Wisconsin to form an LLC as indicated above on my behalf. Attorney Thomas B. Burton shall be known as the Organizer and Drafter of the Article of Organization but shall not be a member of said company. Attorney Thomas B. Burton agrees to pay the filing fee with the State of Wisconsin (\$130 online, or \$170 by mail) at the time of filing as an advance on my behalf, but I understand that I am responsible for reimbursing him for this cost by check within 5 days of filing. I understand that I am also responsible for paying Attorney Thomas B. Burton's legal fees at his current hourly rate for performing these services, unless we have agreed to some other fee arrangement in a separate written fee agreement.

After Attorney Burton has successfully obtained Articles of Organization from the State of Wisconsin for the LLC named above, I also authorize Attorney Thomas B. Burton, as my third party designee, to apply for an Employee Identification Number (EIN) with the Internal Revenue Service and answer questions regarding completion of the form, on my behalf. I further authorize Attorney Thomas B. Burton to receive the Employee Identification Number on my behalf. This

Employee Identification Number will be used in the operation of the above mentioned LLC of which I am a member.

Client Signature/Date

Client Signature/Date

EIN Third Party Designee Authorization

Client's Full Name (First, Middle, Last): _____

Client's Social Security Number: _____

I, the above named client, authorize Attorney Thomas B. Burton, as my third party designee, to apply for an Employee Identification Number (EIN) with the Internal Revenue Service and answer questions regarding completion of the form, on my behalf. I further authorize Attorney Thomas B. Burton to receive the Employee Identification Number on my behalf. This Employee Identification Number will be used in the operation of the above mentioned LLC of which I am a member.

Client Signature/Date

Instructions: Please complete this form, sign and date and return to my office via U.S. Mail to the following address:

Burton Law LLC
310 Pinnacle Way, Suite 301
Eau Claire, WI 54701

