

Confidential Questionnaire for A Nevada Limited-Liability Company

THE RUSHFORTH FIRM, LTD.

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A. Limited-Liability Company.

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Name of Company (include "LLC", "Ltd", etc.)	Name of Registered Agent for Service of Process	Telephone	Fax
Address of Company	Address of Registered Agent for Service of Process	Address Where Records are Maintained	
	<input type="checkbox"/> -Same as company	<input type="checkbox"/> -Same as agent	<input type="checkbox"/> -Same as company
Purpose and type of LLC (check all that apply):	<input type="checkbox"/> -Operating trade or business; <input type="checkbox"/> -Investment holding/management company; <input type="checkbox"/> -For value-discounted gifts and/or inheritances; <input type="checkbox"/> -For protection of LLC assets against judgments and other creditors' claims against members; <input type="checkbox"/> -For protection of non-LLC assets against judgments and other creditors' claims against company; <input type="checkbox"/> -100% family owned; <input type="checkbox"/> -Other (Specify):		

B. Members and Managers. (Use additional pages as needed. Check all applicable boxes under each name.)

Name	Residence or Business Address	Contribution / Percentage Interest
<input type="checkbox"/> Voting Member; <input type="checkbox"/> Nonvoting; <input type="checkbox"/> Manager		
<input type="checkbox"/> Voting Member; <input type="checkbox"/> Nonvoting; <input type="checkbox"/> Manager		
<input type="checkbox"/> Voting Member; <input type="checkbox"/> Nonvoting; <input type="checkbox"/> Manager		
<input type="checkbox"/> Voting Member; <input type="checkbox"/> Nonvoting; <input type="checkbox"/> Manager		

C. Additional Information. (Check the desired choice. Default choices in bold.)

Duration	<input type="checkbox"/> - Perpetual ; <input type="checkbox"/> -Other (Specify):	Type	<input type="checkbox"/> - Standard ; <input type="checkbox"/> -Series
Continuation	Upon death, retirement, resignation, expulsion, bankruptcy, etc. remaining members have right to continue business. <input type="checkbox"/> - Yes ; <input type="checkbox"/> -No.		
Purpose	If blank, "any lawful purpose".		
Management	<input type="checkbox"/> - Manager-managed ; <input type="checkbox"/> -Member-managed	Admission of New Member	<input type="checkbox"/> - Majority vote ; <input type="checkbox"/> -unanimous vote; <input type="checkbox"/> -Other (specify):
Name of Bank; Signatories	<input type="checkbox"/> -Only 1 signature required; <input type="checkbox"/> -2 signatories required; <input type="checkbox"/> -1 signature if \$_____ or less.		
Taxation	<input type="checkbox"/> -Sole proprietor (1 member); <input type="checkbox"/> - Partnership ; <input type="checkbox"/> -C corporation; <input type="checkbox"/> -S corporation.		
Accountant		Fiscal Year	<input type="checkbox"/> - December . <input type="checkbox"/> -_____.

Office use only:

<input type="checkbox"/> SS-4; <input type="checkbox"/> -2553; <input type="checkbox"/> -8832 EIN:	<input type="checkbox"/> Resident Agent <input type="checkbox"/> Annual Fee	(Buy-Sell) <input type="checkbox"/> Cross; <input type="checkbox"/> Redemption; <input type="checkbox"/> Hybrid <input type="checkbox"/> Mandatory buy-out; <input type="checkbox"/> Right of first refusal; <input type="checkbox"/> No buy-out, transferee status.
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