"LLC" CORPORATION CHECKLIST

In order to prepare the organizational documents and minute book for a new Michigan business corporation, please furnish the following information:

What type of Corporation: LLC

Resident	Agent:
1.	Name:
	Address: City/State/Zip:
	City/State/%1p:
	Telephone No.:
	Fax No.:
	Social Security No.:
	Date of Birth: Driver's License No.:
	Driver's License No.:
2.	Name of Corporation: (must contain "LLC or L.L.C."
	1st Choice:
•	1 st Choice: (Alternative choices might be necessary if the first
	choice is unavailable.)
	2 nd Choice:
•	3 rd Choice:
•	
3.	Assumed names: Yes No If yes, specify:
•	Address of Business:
4.	Address of Business:
	County Where Business is Located:
5.	
6.	How many Employees?
0.	
7.	Principal activity of Business:
· v.	
8.	Do you sell any retail/wholesale products? If yes, what products do you sell?
	AUGE DIOGRACES CO 1
9.	Single Member?
7.	Multiple Members?

10.	Do you estimate your and				recerbra	LO
	be over \$250,000?	Yes		No		
11.	Which taxes do you expec	et to	owe?	,		
	Sales Tax?	Yes		No		
•	Use Tax?	Yes		No		
	Income Tax Withholding?	Yes		No		
	Single Business Tax?	Yes		No		**
	UA Unemployment Tax?	Yes		No	*	
12.	Additional Members:				-	
				•		
	Name:					
	Address:					
	Telephone No:			· ·		
	Date of Birth:		•			
	Social Security No:					
	Drivers License:					· · ·