



**JARED N. LYLES, P.C.**  
ATTORNEY AT LAW

**INFORMATION SHEET FOR CREATION OF BUSINESS ORGANIZATION**

Client Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Business Organization: Corporation L.L.C. S-Corp P.C. Partnership L.L.P.

Name of Business: (1<sup>st</sup> Choice) \_\_\_\_\_

(2<sup>nd</sup> Choice) \_\_\_\_\_

*\*\* Names are subject to clearance through a Name Reservation Request, which we will perform for you*

Business Street Address: \_\_\_\_\_

Mailing: \_\_\_\_\_

Name of Incorporators / Partners / Etc.:

Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*\*\* If more than one member of the LLC, it is advised that you obtain an Operating Agreement.**

Principal Business Activity: \_\_\_\_\_

Officers (if applicable):

Home Street Address:

(Pres) \_\_\_\_\_

(V.P.) \_\_\_\_\_

(Sec.) \_\_\_\_\_

(Treas.) \_\_\_\_\_

Registered Agent: \_\_\_\_\_

Address: \_\_\_\_\_

Accountant: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

May we send the filing directly to your accountant once it is recorded? \_\_\_\_\_ Yes \_\_\_\_\_ No

Is corporation an outgrowth or continuation or form of a predecessor? \_\_\_\_\_

If Yes, type of organization and period of existence: \_\_\_\_\_

Fiscal Year (If not January 1<sup>st</sup> – December 31<sup>st</sup>): \_\_\_\_\_

**STOCK**

*(Only complete this section if you are creating a Corporation; LLC's do not have stock)*

Deny shareholders preemptive rights? \_\_\_\_\_ Yes \_\_\_\_\_ No

Number of shares of stock authorized? Common \_\_\_\_\_ Preferred \_\_\_\_\_

Number of shares of stock to be issued? Common \_\_\_\_\_ Preferred \_\_\_\_\_

Par Value of Common Stock? \$ \_\_\_\_\_ Par Value of Preferred Stock? \$ \_\_\_\_\_

Transfer of Stock to be Restricted? \_\_\_\_\_ Yes \_\_\_\_\_ No

Percent Needed to Call Special Meeting: \_\_\_\_\_

Stockholders:	No. of Shares	Date Acquired	SS#
_____			
_____			
_____			
_____			

Bank to be used: \_\_\_\_\_ Location: \_\_\_\_\_

Annual shareholders meeting to be on the \_\_\_\_\_ day in the month of \_\_\_\_\_ at \_\_\_\_\_ o'clock

Chairman of the first shareholders meeting? \_\_\_\_\_

Secretary of the first shareholders meeting? \_\_\_\_\_

**Additional Actions Needed When a Business is Created**

Who to apply for Franchise Tax Permit (Generally CPA): \_\_\_\_\_

Who to Apply for Federal EIN (Generally CPA): \_\_\_\_\_

Who to Apply for S-Corp Status? (Generally CPA): \_\_\_\_\_

**Special Types of LLC**

Is this a Series LLC under 10A-5A-11? \_\_\_\_\_ Yes \_\_\_\_\_ No

*Note: A series LLC can be used to segregate the LLC's assets and liabilities into separate cells or pods, each of which is called a series. Each series can own its assets separately from the assets of the LLC or any other series of the LLC. Each series can incur liabilities that are enforceable only against the assets of that series, have its own members and managers, and enter into contracts and sue and be sued in its own name. It is in effect an entity within an entity.*

Is this a Professional LLC under 10A-5A-8? \_\_\_\_\_ Yes \_\_\_\_\_ No

*A Professional LLC is an LLC that provides professional services. The law is not extremely clear on what constitutes a professional services; it states only that an LLC can render professional services if each member or employee who renders those services is licensed or registered to do so under the applicable Alabama law.*

**EMPLOYER IDENTIFICATION NUMBER**

*(This information will be needed by whoever is applying for the EIN# - you or your CPA)*

Trade Name if different from Corporation Name: \_\_\_\_\_

Number of employees expected in next 12 months in following divisions:

\_\_\_\_\_ Non-agricultural \_\_\_\_\_ Agricultural \_\_\_\_\_ Household

To Whom do you sell most of your products or services:

\_\_\_\_\_ Businesses \_\_\_\_\_ General Public \_\_\_\_\_ Other (Explain Below):

\_\_\_\_\_

Have you ever applied for an EIN for this business? \_\_\_\_\_ Yes \_\_\_\_\_ No

First day you paid or will pay wages for this business: \_\_\_\_\_

Do you operate more than one place of business? \_\_\_\_\_ No \_\_\_\_\_ Yes:

\_\_\_\_\_

Have you ever applied for an EIN for this or any other business? If yes, state the name and trade name, also the approximate date, city and state where you applied: \_\_\_\_\_

SPECIAL PROVISIONS

Employment / Non-Compete Contract: \_\_\_\_\_ Yes      \_\_\_\_\_ No. If yes, for whom, what position and specific restrictions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Surrender stock on employment termination? \_\_\_\_\_ Yes      \_\_\_\_\_ No

Fees to be paid:	Amount (Subject to change if changed by the State of County)
Name Reservation	\$ 28.00
Probate Judge	\$ 56.00
Secretary of State	\$ 100.00
Document Prep (JNL, PC)	\$ <u>266.00</u>
Total:	\$ 450.00

Additional Remarks

\_\_\_\_\_  
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\_\_\_\_\_  
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