

HENRY J. NOVAK, Esq.  
Client LLC Intake Information

**Client Information**

1. Client Name: \_\_\_\_\_
2. Contact Info:  
*Address:* \_\_\_\_\_  
*Phone:* \_\_\_\_\_  
*Email:* \_\_\_\_\_
3. Client SSN: \_\_\_\_\_

**Purpose of LLC**

4. The LLC will be used to hold: *Real Estate* \_\_\_ *Trading Account* \_\_\_ *Other* \_\_\_
5. If other, briefly describe: \_\_\_\_\_
6. Will this LLC be assigned an interest in a Trust? *Yes* \_\_\_ *No* \_\_\_

**LLC Information**

7. LLC Name: \_\_\_\_\_
8. Alternate Name: \_\_\_\_\_
9. Is this LLC for a professional service: *Yes No If yes, what type?*
10. Filing State: \_\_\_\_\_
11. Are you forming multiple LLCs: *Yes* \_\_\_\_\_ *No* \_\_\_\_\_
12. Are you forming a series LLC: *Yes* \_\_\_\_\_ *No* \_\_\_\_\_
13. LLC Address: \_\_\_\_\_  
\_\_\_\_\_  
(Physical address—Do not enter P.O. box.)
14. Registered Agent: \_\_\_\_\_
15. The LLC will be: *Manager-Managed Member-Managed*
16. The manager is a(n): *Entity* \_\_\_ *Person* \_\_\_\_\_

**Manager & Member Information**

16. Manager Name: \_\_\_\_\_  
*(If using an existing corporation as manager, please also list the President, i.e. ABC, Inc. – Joe Smith, President.)*

17. Manager Address: \_\_\_\_\_  
\_\_\_\_\_

18. Will the manager also be a member? Yes \_\_\_\_\_ No \_\_\_\_\_

19. LLC Tax Status:  
*Disregarded* \_\_\_\_\_ *C-Corporation* \_\_\_\_\_ *S-Corporation* \_\_\_\_\_ *Partnership* \_\_\_\_\_

20. Members:

a. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

SSN \_\_\_\_\_  
Ownership % \_\_\_\_\_

b. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

SSN \_\_\_\_\_  
Ownership % \_\_\_\_\_

c. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

SSN \_\_\_\_\_  
Ownership % \_\_\_\_\_

d. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

SSN \_\_\_\_\_  
Ownership % \_\_\_\_\_