

**Required Entity Formation Information**

1. Type of Entity:

- a. **Traditional:** *(Most Often Selected-Unless You Are Operating a Service Business)*  
 Corporation                      S-Corporation                      Partnership                      X    LLC
- b. **Professional:** *(Operating Companies of Professionals Who Must Be Licensed to Practice)*  
 P.C    PLLC

2. Taxation of Entity: *(Select One Type)*

Sole Prop/Disregarded Tax Entity                      Corp                      S-Corp                      Partnership

3. Name of Entity: \_\_\_\_\_  
*(Use The Name that You Will Use With Customers)*

4. Purpose of the Entity: \_\_\_\_\_  
*(Examples: To Provide Dental Services, or to Lease Real Estate)*

5. Address of Entity: \_\_\_\_\_

6. Name of Entity Manager: \_\_\_\_\_  
*(Name of Individual Who Will Operate the Company)*

7. Name of Statutory Agent: \_\_\_\_\_  
*(Responsible Individual that Receives Mail from the State-Usually You)*

8. Address of Statutory Agent: \_\_\_\_\_

9. Owners of the Entity: *(Please list the names, addresses and ownership percentage of all the owners)*

1<sup>st</sup> Owner

- a. Name: \_\_\_\_\_
- b. Address: \_\_\_\_\_
- c. Percentage: \_\_\_\_\_
- d. Social Sec: \_\_\_\_\_

2<sup>nd</sup> Owner

- a. Name: \_\_\_\_\_
- b. Address: \_\_\_\_\_
- c. Percentage: \_\_\_\_\_
- d. Social Sec: \_\_\_\_\_

3<sup>rd</sup> Owner

- a. Name: \_\_\_\_\_
- b. Address: \_\_\_\_\_
- c. Percentage: \_\_\_\_\_
- d. Social Sec: \_\_\_\_\_