

InfotaxSquare **com** [®]

Incorporate. LLC. Income Taxes. Business Taxes



Online Live Customer Support
Available 24/7

TOLL FREE
1-866-754-4460

FAX:
718-732-2471

FOREIGN ENTITY QUALIFICATION – L.L.C

Please complete the requested information below for your Foreign Entity Qualification.
Infotax Square representative will begin processing your order upon receipt of payment.

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

PLEASE SELECT

Type of Entity:

Home State:

(Please Select the state in which this entity is currently
incorporated or organized.)

Foreign State:

(Please Select the state in which you would like this entity
to qualify as a **Foreign Entity** for purpose of conducting business.)

CONTACT INFORMATION (This is where we will ship your documents)

First, Last Name:

Address:

Suite/Apt:

City, State, Zip:

Telephone Number:

() -

Fax Number (if any):

() -

BUSINESS OVERVIEW

Name of Entity:

State of Formation:

Date of Formation:

(mm/dd/yyyy)

Fiscal Year End:

Business Description:

Address:

(if different from the above)

Suite/Apt:

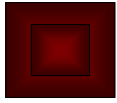
City, State, Zip:

HOME STATE REGISTERED AGENT's INFO

Full Name:

Address:

City, State, Zip:



MEMBER / MANAGER INFORMATION

MEMBER / MANAGER 1

Full Name: _____

Social Security Number: _____ (999-99-9999)

Residence Address: _____

City, State, Zip: _____

Phone, Fax: _____

MEMBER / MANAGER 2

Full Name: _____

Social Security Number: _____ (999-99-9999)

Residence Address: _____

City, State, Zip: _____

Phone, Fax: _____

FOREIGN STATE INFORMATION

A Corporation and or LLC are usually required to maintain a "Registered Agent" in each state where it will be qualified as a Foreign Entity. Please indicate whether you would like Infotax Square to provide you with registered agent services or you will be designating the registered agent who will server in the state where your entity is qualifying.

Check this box if you would like Infotax Square to provide you with Registered Agent Services in the state where you are qualifying as a foreign entity. **NOTE: An annual fee of \$159.00 per year will apply to this order.**

No, I will provide registered agent services myself (if you select no, please complete the following):

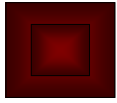
Full Name: _____

Address: _____

City, State, Zip: _____

ORDER INFORMATION (For Pricing click here)

Foreign Qualification State Filing Fees:	
Include Expedite Filing Fees:	
Originating State Certificate of Good Standing Fees:	
Infotax Square Fee for Foreign Entity Filing:	
Shipping and Handling (UPS Delivery):	
Total	



CARDHOLDER INFORMATION

Check (payable to INFOTAX SQUARE): Mail to: 109-13 Centerville Street, Suite 3R, Ozone Park, NY 11417
CREDIT CARD: This authorizes Infotax Square to charge my credit card for filing Certificate of Incorporation.



Card Type: Visa Master Card American Express Discover

First Last Name: _____

Billing Address: _____ City, State, Zip _____

Phone, Fax: _____

Card Number: _____ Expiration Date: _____

Country: _____

General Comments / Instructions:

TERMS OF USE AGREEMENT & DISCLAIMER (Click Here For Online)

The undersigned hereby represents and warrant that he/she duly authorizes Infotax Square to charge his/her credit card for the above services rendered.

Name / Signature

Official Use Only - Prepared by: _____

You can mail the form at:

Infotax Square
109-13 Centerville Street, Suite 3R
Ozone Park, NY 11417
Fax at: 718-732-2471

***Important: Please save the form before submitting**