

**InfotaxSquare**  **com** <sup>®</sup>

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 - CORPORATION**

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:

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:

Authorized Shares:

Issued Shares (if any):

Par Value (if any):

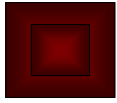
Business Description:

Address:

(if different from the above)

Suite/Apt:

City, State, Zip:



**HOME STATE REGISTERED AGENT'S INFO**

Full Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

**OFFICER/SHAREHOLDERS' INFORMATION**

**OFFICER 1**

Full Name: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ (999-99-9999)  
Residence Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone, Fax: \_\_\_\_\_

**OFFICER 2**

Full Name: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ (999-99-9999)  
Residence Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone, Fax: \_\_\_\_\_

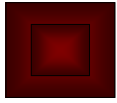
**FOREIGN STATE INFORMATION**

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: \_\_\_\_\_



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**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 ):	
<b>Total</b>	

**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**