

Illinois Limited Liability Company Act
**Application for Admission to
Transact Business**

FILE #: _____

Secretary of State
Department of Business Services
Limited Liability Division
501 S. Second St., Rm. 351
Springfield, IL 62756
217-524-8008
www.cyberdriveillinois.com

This space for use by Secretary of State.

SUBMIT IN DUPLICATE

Type or Print Clearly.

This space for use by Secretary of State.

Filing Fee: \$500

Penalty: \$

Approved: _____

1. Limited Liability Company Name: _____

2. Assumed Name: _____

(This item is only applicable if the company name in item 1 is not available for use in Illinois, in which case form LLC 1.20 must be completed and submitted with this application.)

3. Jurisdiction of Organization: _____

4. Date of Organization: _____

5. Period of Duration: _____

(Enter Perpetual unless there is a Date of Dissolution provided in the agreement, in which case enter that date.)

6. Address of the Office required to be maintained in the jurisdiction of its organization or, if not required, of the Principal Place of Business: (P.O. Box alone or c/o is unacceptable.)

Number	Street	Suite #
City, State		ZIP Code

7. Registered Agent: _____

First Name	Middle Name	Last Name
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Registered Office: _____

Number	Street	Suite #
City		Zip Code
Illinois		

(P.O. Box alone or c/o is unacceptable.)

8. If applicable, Date on which Company first conducted business in Illinois: _____

(continued on back)

LLC-45.5

9. Purpose(s) for which the Company is Organized and Proposes to Conduct Business in Illinois: _____

10. The Limited Liability Company: (check one)

a. is managed by the **manager(s)** (List names and addresses.)

b. has management vested in the **members(s)** (List names and addresses.)

11. The Illinois Secretary of State is hereby appointed the agent of the Limited Liability Company for service of process under circumstances set forth in subsection (b) of Section 1-50 of the Illinois Limited Liability Company Act.

12. **This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60 days, by the officer of the state or county wherein the LLC is formed.**

13. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.

Dated: _____
Month, Day, Year

Signature

Name and Title (type or print)

If applicant is signing for a Company or other Entity, state Name of Company and indicate whether it is a member or manager of the LLC.