SPIEGEL & UTRERA, P.A.
LAWYERS

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FORM A FLORIDA LIMITED PARTNERSHIP BY FAX

Instructions: Please complete and fax this sheet Toll Free: 1 (800) 520 – 7800 to begin the process of forming your Florida Limited Partnership. Spiegel & Utrera, P.A. will contact you to review your details and to provide answers to all your business formation needs.

CONTACT INFORMATION

Full Name: _____

Your daytime phone number: (____) _____ Your fax number (_____) _____

Email address: _____

Your address: _____

INITIAL LIMITED PARTNERSHIP DETAILS

Name of your Limited Partnership: _____

NATURE OF BUSINESS (Briefly describe what the Limited Partnership will do): _____

_____

When we contact you please be sure to have the names, contact information and social security numbers of any additional parties that you would like to be included in the formation of your Limited Partnership.

Florida Limited Partnership	$1124.95

Please **CIRCLE** Any Additional Services that you would like to be addressed when consulting with Spiegel & Utrera, P.A.:

General Counsel Club & Registered Agent Service
Detours and Contradictions
Charlie's Entrepreneurial Journey
Service Agreement
Florida Fictitious Name
Anonymity
Mail Forwarding Service
Non-Voting Partnership Interest
Business Checking, Investment Account and Delayed Debit Gold MasterCard
Federal Tax ID Number
D & B Number
Individual Taxpayer Identification Number (ITIN)
Florida New Hire Reporting
Florida State Sales Tax Number
Florida Unemployment Tax Account Number
Limited Partner Indemnification Agreement
General Partner Indemnification Agreement
Lender's Agreement & Promissory Note
Security Agreement
Perfecting the Lien Created by the Security Agreement – Uniform Commercial Code
Limited Partners Restrictive Agreement
Limited Partner Divorce Protection Provisions in the Limited Partners Restrictive Agreement
General Partners Restrictive Agreement
General Partner Divorce Protection Provisions in the General Partners Restrictive Agreement
Limited Partnership Agreement
Limited Partnership Management Agreement
Home Office Lease
Motor Vehicle Lease
Office Equipment Lease
Employee Benefits and Policies
Employment Agreement
Independent Contractor Agreement

Remember to visit www.Amerilawyer.com for a complete list of services.

SPEED OF SERVICE

Please **CIRCLE** the Speed of Service in which you would like to receive your order:

NO RUSH - Please provide me with your regular 2-4 week service.
NEXT DAY - Please provide me with a Next Day Limited Partnership
SAME DAY - Please provide me with a Same Day Limited Partnership

SHIPPING DETAILS

Limited Partnership Packages may be shipped to you via Regular (2-3 day) Service, via Overnight Delivery or may be picked up at anyone of our office locations.

PAYMENT OPTIONS

After we review your order, how will you be paying for this service? Please provide payment information. **Please note NO charges will be processed until you are contacted by Spiegel & Utrera, P.A.**

Credit Card: ____ VISA ____ MasterCard ____ American Express ____ Discover ____ PayPal ____ Western Union

Credit Card Number: _____

Expiration Date: _____ Card ID Number: _____

Name on Credit Card: _____

Billing Address on Credit Card: _____

Authorized Signature: _____

To place this order online please visit us at **www.AmeriLawyer.com**