

**FORM A**  
**NEVADA SERIES LLC BY FAX**

Instructions: Please complete and fax this sheet to Toll Free: 1 (800) 520-7800 to begin the process of forming your Nevada Series LLC. 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 mailing address: \_\_\_\_\_

**INITIAL COMPANY DETAILS**

Name of your Series LLC: \_\_\_\_\_

NATURE OF BUSINESS (Briefly describe what the Series LLC 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 LLC.**

Nevada Series Limited Liability Company                      \$489.95

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     | Indemnification Agreement                               |
| Detours and Contradictions                          | Lender's Agreement & Promissory Note                    |
| Charlie's Entrepreneurial Journey                   | Security Agreement                                      |
| Service Agreement                                   | Perfecting the Lien Created by the Security Agreement – |
| Nevada Fictitious or Assumed Name                   | Uniform Commercial Code                                 |
| Mail Forwarding Service                             | Initial Series LLC Operating Agreement                  |
| Non-Voting Membership Interests                     | Additional Series Operating Agreement                   |
| Business Checking, Investment Account and           | Series LLC Members Restrictive Agreement                |
| Delayed Debit Gold MasterCard                       | Member Divorce Protection Provisions in the Series LLC  |
| Sub Chapter "S" Tax Status                          | Members Restrictive Agreement                           |
| IRS Section 1244 LLC Membership Interests for       | Series LLC Management Agreement                         |
| Sub Chapter S LLCs                                  | Dual Class LLC  |
| Federal Tax ID Number                               | Dual Class Management Agreement                         |
| D & B Number  | Home Office Lease                                       |
| Individual Taxpayer Identification Number (ITIN)    | Motor Vehicle Lease                                     |
| Nevada New Hire Reporting                           | Office Equipment Lease                                  |
| Nevada Sales Tax Number                             | Employee Benefits and Policies                          |
| Nevada Unemployment Tax Registration                | Employment Agreement                                    |
| Nevada Business Registration                        | Independent Contractor Agreement                        |
| Nevada Retailer's Resale and Exemption Certificates | Special Purpose Limited Liability Company for           |
| Special Purpose Limited Liability Company for       | Self-Directed 401(K)                                    |
| Self-Directed IRA Account                           |   |

**Remember to visit [www.Amerilawyer.com](http://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 3-4 week service.

IN A HURRY - Please provide me with your 4 Business Day Series LLC Service

TWO DAY - Please provide me with your 2 Business Day Series LLC Service

**SHIPPING DETAILS**

LLC Packages may be shipped to you through Regular (2-3 day) Service, through Overnight Delivery or may be picked up at any one 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: \_\_\_\_\_