## LAW OFFICE OF JAMIE ETZKORN, PLLC

ATTORNEY & COUNSELOR AT LAW WWW.ETZKORNLAW.COM

## **COMPANY FORMATION INFORMATION FORM**

I.	NAME OF COMPANY:	
	Preferred Name:	
	Second Name Choice:	
	Third Name Choice:	
	Assumed Name Certificate: Yes	No
	Assume Name Choice:	
	File at Texas Secretary of State: Yes	No
	File at County of Principal Location: Yes	No
II.	OTHER FILING INFORMAITON	
	a) Organizer Information	
	Organizerøs Name:	
	Address:	
	Telephone:	
	b) Registered Agent	
	Agent  Name:	
	Address:	
	Telephone:	Fax:

c) EIN Information				
Social Security Number:				
Full Legal Name:				
Telephone Number:				
E-mail Address:				
d) Description of Entity				
1) General Partnership				
e) Choice of Governance of Limit	ed Liability Company: Check One			
e) Choice of Governance of Limit Members				
	Number:			
Members	Number:			
Members	Number:			
Members  Managers  f) Manager/Member Information  1. Manager/Member  Name: Address:	Number:  Number:  Fax:			
Members  Managers  f) Manager/Member Information  1. Manager/Member  Name: Address: Telephone:	Number:  Number:  Fax:			
Members  Managers  f) Manager/Member Information  1. Manager/Member  Name: Address: Telephone: E-mail:  2. Manager/Member	Number:  Number:  Fax:			
Members  Managers  f) Manager/Member Information  1. Manager/Member  Name: Address: Telephone: E-mail:  2. Manager/Member  Name: Address:	Number:  Number:  Fax:			
Members  Managers  f) Manager/Member Information  1. Manager/Member  Name: Address: Telephone: E-mail:  2. Manager/Member  Name: Address:	Number: Number: Fax: Fax:			

3. Manager/Member			
Name:			
Address:			
Telephone:	Fax:		
E-mail:			
g) Officers:			
President:			
Vice-President:			
Treasurer:			
Secretary:			
h) Directors for Corporation			
1. Director			
Name:			
Address:			
Telephone:	Fax:		
E-mail:			
2. Director			
Name:			
Address:			
Telephone:	Fax:		
E-mail:			
3. Director			
Name:			
Address:			
Telephone:			
E-mail:			
i) Shareholders of Corporation			
4. Shareholder			
Name:			
Address:			
Telephone: Fax:			
E-mail:			

5. Shareholder	
Name:	
Address:	
Telephone:	Fax:
E-mail:	
6. Shareholder	
Name:	
Address:	
Telephone:	Fax:
E-mail:	
7. Officers:	
7. Officers:	
President:	
Vice-President:	
Treasurer:	
Secretary:	
COMPANY STRUCTURE	
Total Number of Units or Shares:	
Ownership Interest:	
Capital Contribution by Each Person:	
NOTES	
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III.

IV.