

## Client interview checklists for LLC formation, outfit and EIN

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### Easy instructions for the fillable PDF form

This Adobe PDF form lets you electronically fill in the form to print out, reuse, or attach to an email for submission. Visit [www.LawyersAidService.com](http://www.LawyersAidService.com) for the most up-to-date version. You must have Adobe Reader version 8 or later for this document to function correctly. Download it [here](#).

The electronic version of the checklist features **key questions**. As you answer the key questions (those having a ➔), other appropriate questions become active for you. Change your key choices, and different questions become active. Inactive questions will have no active blue boxes.

If filling out electronically, hover your mouse over many blue selection boxes to view a pop-up with information about that question. The last page of the checklist automatically totals your order to make it easier to mail payment simultaneously.

When finished, you can submit your order form by mail, by printing and faxing, or by email. There is also a “Clear form” button on the last page.

Add your further instructions and overflow text in the box on page 5.

Instructions box:

### Covered in these checklists

#### Limited Liability Company formation

Section A lets you set up a new Texas LLC or PLLC. Lawyer’s Aid will check the name availability, create the Certificate of Formation on archive bond, advance the filing fees and submit filing to the State, and help you resolve any problems on the spot. For other entities and filings, see our website, or call (888) 474-2112.

#### Professional registered agent service

On question 4 of Section A, you can designate Lawyer’s Aid as the company’s registered agent. For peace of mind about handling of legal notices, including lawsuits, a professional registered agent service is recommended. If you choose Lawyer’s Aid, we’ll follow up to get your contact instructions.

#### Limited Liability Company Outfit

In Section B you can choose a Deluxe or Standard Company Outfit. Outfits contain embossing seal, minutes, company agreement, 20 membership interest certificates, transfer ledger, tax guidance, and extensive forms on archive bond. The black vinyl three-ring binder shows the company name in gold on its spine, and stores in a matching slipcase. In the Deluxe Outfit, all text is custom-typed with your information seamlessly filled in. The Standard Outfit comes with blanks to fill in.



#### IRS Employer Identification Number (EIN)

Section C allows you to order an EIN for an LLC. Lawyer’s Aid deals with the IRS instead of you to get the federal tax ID. You receive the EIN on the SS-4 form usually within 24-48 hours, by your choice of email or fax, then mail. If the principle officer does not have a Social Security Number (SSN) or an Individual Taxpayer ID Number (ITIN), acquisition of the EIN will likely take 2+ weeks.

**A. LLC formation checklist**(For other entities and filings, see our [website](#))

- 1. The company will be governed by its: ☐ Members ☐ Managers
2. Proposed company name and two alternatives. LLC names must include limited liability company or limited company or an abbreviation. Professional LLC names must include professional limited liability company or an abbreviation. **Use exact punctuation, capitalization, and spacing.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Purpose (*Check one. A nonprofit purpose is permitted.*):

**LLC:** ☐ “any lawful purpose...” (*recommended*)

☐ non-standard clause included in instructions box on [page 5](#)

**PLLC:** ☐ “the practice of \_\_\_\_\_” (*profession*)

**NP LLC:** ☐ IRS 501(c)(3) plus any other purpose clause attached in instructions box on [page 5](#)

☐ non-501(c)(3) purpose clause attached in instructions box on [page 5](#)

4. a. Registered agent and registered office **street** address:

[RA Duties](#)

☐ Lawyer’s Aid Service, Inc., 505 West 15th, Austin, TX 78701

[RA Benefits](#)

☐ Other registered agent (*PO box not allowed. If rural, street description plus PO box is allowed.*):

Registered Agent name: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

b. ☐ The RA has consented to serve. (*required*)

c. ☐ Also file RA’s signed written consent. (*optional free form at [LawyersAidService.com/RA](http://LawyersAidService.com/RA)*)

5. Initial mailing address (*out-of-state address or PO box allowed*):

6. Number of initial Managers or Members, whichever will govern: \_\_\_\_\_ (*1 is minimum*).

Names and complete addresses (*attach additional pages if needed, or use Instructions Box on [page 5](#)*):

7. What turnaround time and format?

☐ Fastest: form-style filing, in 1-3 business days

☐ Looks most professional: classic legal-document style, in 2-4 business days

8. Add optional special clauses to the Certificate? (*Check all that apply. Call or email for exact text.*)

**IRS related:** ☐ Plan to file for Sub S status ☐ Designated under 1244 stock

**Other:** ☐ Limit Manager liability ☐ Buy-sell agreement

☐ Limited duration: \_\_\_\_\_ years ☐ Delayed effective date: \_\_\_\_\_

9. Add your custom clause to the Certificate? ☐ No ☐ Yes, text attached on [page 5](#)

→ A **key question** activates other questions appropriate to your choice.

(continued)

**B. Limited Liability Company Outfit checklist**

- ➔ 10. a. This order is for an: ☐ LLC outfit with formation ☐ LLC outfit **only**  
 b. Type of outfit: ☐ Deluxe Customized **Fill in 1-20** (3-9 and 12-20 may be left blank)  
☐ Standard **Fill in 1, 2, 10, and 11.** Defaults used for 3, 19, and 20.
11. Membership interest certificates:  
 Number of signature lines (4 is maximum): \_\_\_\_\_  
 Please select the title for each signature line. (*Check all that apply.*)  
☐ Secretary (*default*) ☐ President ☐ Member ☐ Manager ☐ Other:
12. Initial principal **place of business** of the LLC (*complete street address is best*):
13. Organizational meeting:  
 Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location (*City, State*): \_\_\_\_\_  
 Meeting Chair: \_\_\_\_\_ Meeting Secretary: \_\_\_\_\_
14. Officers:  
 President: \_\_\_\_\_ Secretary: \_\_\_\_\_  
 VP: \_\_\_\_\_ Treasurer: \_\_\_\_\_  
 Other officers (*names & titles*): \_\_\_\_\_
15. Initial Members and the units of membership interest issued to each at the organizational meeting:  
*(a Member's proportional interest is the number of his or her units divided by all outstanding units)*
- | Member names and mailing addresses | Number of units | Nature and value of contribution |
|------------------------------------|-----------------|----------------------------------|
|                                    |                 |                                  |
|                                    |                 |                                  |
|                                    |                 |                                  |
|                                    |                 |                                  |
|                                    |                 |                                  |
16. Banking Resolution (*optional, but required by many banks*):  
 a. Name and address of bank selected as company depository: \_\_\_\_\_ b. Person(s) authorized to draw on company accounts (names and titles): \_\_\_\_\_
17. Any custom clauses attached (\$15 fee)? ☐ No ☐ Yes, add to: ☐ Agreement ☐ Minutes
18. Formation date (*if known*): \_\_\_\_\_ Filing number (*if known*): \_\_\_\_\_
19. Options:
- |  | Statutory defaults                                    | Add'l Options ( <i>Deluxe only</i> )  |
|--|---|---|
| a. One vote per:                             | <input type="checkbox"/> Member                       | <input type="checkbox"/> Unit of membership interest  |
| b. Votes to amend the agreement:             | <input type="checkbox"/> ALL                          | <input type="checkbox"/> a majority <input type="checkbox"/> 2/3 <input type="checkbox"/> 3/4 |
| c. Votes to admit new members:               | <input type="checkbox"/> ALL                          | <input type="checkbox"/> a majority <input type="checkbox"/> 2/3 <input type="checkbox"/> 3/4 |
| d. Votes to admit assignees as members:      | <input type="checkbox"/> ALL                          | <input type="checkbox"/> a majority <input type="checkbox"/> 2/3 <input type="checkbox"/> 3/4 |
| e. Profit, loss, distributions allocated by: | <input type="checkbox"/> Agreed value of contribution | <input type="checkbox"/> Units of membership interest   |
20. Blanks in outfit (attorney or client fills in) to be indicated by: ☐ underlines (*default*) ☐ spaces
- ➔ A **key question** activates other questions appropriate to your choice. (continued)

## C. Checklist for IRS Employer Identification Number (EIN)

- ➡ ☐ To register the new company with the IRS, a federal requirement, check the box to the left.

**All fields are required.**

Lawyer's Aid Service obtains your EIN, usually the same day or the day after the LLC is formed, and reports it to you immediately. You receive Form SS-4 by mail for your records. If the named principle member does not have a Social Security Number (SSN) or an Individual Taxpayer ID Number (ITIN), acquisition of the EIN will likely take 2+ weeks.

To order an EIN for any other kind of business entity, call (888) 474-2112 or see our [website](#).

21. LLC name *(if already known)*:

22. Street address for tax purposes:

23. Mailing address, if different:

24. Number of members:

25. Principle member:

Full name: \_\_\_\_\_ *(as it appears in Social Security records)*

Social Security Number *(or ITIN)*: \_\_\_\_\_ ☐ Does not have SSN/ITIN (\$30 fee)

Title: ☐ President ☐ Other: \_\_\_\_\_

26. LLC tax classification *(choose one)*:

☐ Default: Single-member LLC is taxed as sole proprietorship

Multi-member LLC is taxed as a partnership

☐ C Corporation *(must file IRS Form 8832 within 12 months to elect this classification)*

☐ S Corporation *(must file IRS Form 2553 within 75 days to elect this classification)*

27. Closing month of accounting year: ☐ December *(recommended)* ☐ Other:

28. Fill in this box only if there will be employees in the next 12 months:

Highest number of employees expected in next 12 months:

Agricultural: \_\_\_\_\_ Household: \_\_\_\_\_ Other: \_\_\_\_\_

Earliest date wages may be paid: \_\_\_\_\_

Do you expect to pay \$5,000 or less in wages next calendar year (Jan. – Dec.)? ☐ Yes ☐ No

29. Type of business or activity (e.g. healthcare, construction, transportation, food service, real estate, retail, etc.):

30. Specific merchandise sold or produced, or services provided:

31. Business phone:

32. ☐ A Lawyer's Aid Service representative is authorized as third-party designee to obtain the EIN.

33. Notify me of EIN by: ☐ fax ☐ phone ☐ email *(Original is mailed with bill.)*

Fax, phone, or email address: \_\_\_\_\_

➡ A **key question** activates other questions appropriate to your choice.

(continued)

## D. Order form, prices, and contact information

Prices *include* all state filing fees, expedite fee, sales tax, and mail/shipping costs. Prices may change without notice.

### 1. To order, select the services and outfit desired:

#### ☐ LLC Formation

Get the quickest turnaround time possible. Lawyer's Aid checks for name availability; drafts and files the Certificate; obtains the Acknowledgment of Filing; phones, faxes, or emails you with the Acknowledgment (your choice); and mails it with the file-marked Certificate.

To form LLC or PLLC ..... **\$375**

#### ☐ Registered agent service, prorated 1st year:

When a lawsuit is served, the attorney is called immediately. The citation is sent to you via email, Fed-Ex, or fax, according to your instructions, and then mailed as well.

Cost: \$10 per month left in this calendar year.

Future years are \$120 ..... \$ \_\_\_\_\_

#### ☐ EIN service

Lawyer's Aid obtains your IRS EIN and provides you with a copy of form SS-4

☐ Principle member has SSN/ITIN ..... **\$50**

☐ Prin. member has no SSN or ITIN ..... **\$80**

#### ☐ Deluxe Customized LLC Outfit

Seamlessly typed documents and forms customized with your company name in every title and footer. We fill in the company agreement and organizational meeting minutes with your custom information. Looks most professional, saves you hours. This Outfit includes 20 deluxe certificates, interest transfer ledger, an embossing seal, minutes, agreement, forms, binder and slipcase.

Customized Outfit for LLC or PLLC ..... **\$98**

#### ☐ Standard LLC Outfit

Like Customized Outfit, but with blanks in the preprinted text for you to fill in.

Standard Outfit for LLC or PLLC ..... **\$64**

#### ☐ Custom clause on LLC Outfit

Custom clause text attached on [page 5](#) ..... **\$15**

#### ☐ Long name on LLC Outfit

40+ characters in company name ..... **\$10**

#### ☐ Residential address shipping fee ..... **\$10**

#### ☐ Federal Express service:

Call (888) 474-2112 for options... Add \$ \_\_\_\_\_

### 2. Total for the above services and outfit selected .... \$

### 3. Submit to Lawyer's Aid Service:

Email to [maindesk@LawyersAidService.com](mailto:maindesk@LawyersAidService.com)

Print and fax to  
(888) 474-4218

Call (888) 474-2112  
to place your order.

### 4. Submit simultaneous payment:

By credit card via online portal:

[www.LawyersAidService.com/Payment](http://www.LawyersAidService.com/Payment)

Or mail to:

PO Box 848  
Austin, TX 78767-0848

#### **Guarantee**

Unless you are thoroughly satisfied with your Company Outfit, Lawyer's Aid Service will replace it or send you a full refund.

Attorney's name: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact name: \_\_\_\_\_

Phone: \_\_\_\_\_

Firm name: \_\_\_\_\_

Fax: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Email: \_\_\_\_\_

Type or sign your name below to confirm you are sending simultaneous payment (required)

## **E. Your further instructions**

Use this box to

- Enter any special instructions you have about this order, including overflow text, special clauses, or queries about other services.
- Share your comments, complaints, or suggestions. How can we make things better?
- Tell us how to contact you about this order, if you have a preference.
- Let us know how you heard about Lawyer's Aid. An ad? A person?

If, when faxing or mailing in the form, any text overflows the box, please attach it.

**Instructions box:**