Important: Read instructions before completing form			Non-Refundable Processing Fee: \$54.00		
1. Name of Limited Liability Company:					
2. Principal office address: Street Address Required PO Box can be listed after Street Address					
		Address	City	State	Zip
3. The name of the Register	ed Agent (Individ	ual or Business Entity or Commercial Registered Agent):			
The address must be listed if	you have a non-co	mmercial registered agent. See instructions for further details.			
Address of the Registered A					
	Uta	h Street Address Required, PO Boxes can be listed after the Stre	eet Address		
City:			State UT	Zip:	
4. Signature of Organizer					
Signati	ıre:				
5. Name and Address of Members and/or Managers (optional):	1.				
	Name			Position	
	Address	City		State	Zip
	Name			Position	
	Address	City		State	Zip
6. Duration (optional):	Th	e duration of the company shall be perpetual			
	Th	e duration of the company shall be			
7. Purpose (optional):	•				

Under GRAMA {63G-2-201}, all registration information maintained by the Division is classified as public record. For confidentiality purposes, you may use the business entity physical address rather than the residential or private address of any individual affiliated with the entity.