## **Important: Read instructions before completing form**

1. Name of Limited Liability Company:					
2. Principal office address: Street Address Required PO Box can be listed after Street Address					
		Address City	y	State	Zip
3. The name of the Register	ed Agent (Individu	al or Business Entity or Commercial Registered Agent):			
The address must be listed if	you have a non-con	mercial registered agent. See instructions for further details.			
Address of the Registered A	gent.				
riduless of the Registered ri		Street Address Required, PO Boxes can be listed after the Street Add	dress		
City:			State UT	Zip:	
4. Signature of Organizer					
Signat	ure:				
5. Name and Address of Members and/or Managers (optional):	1				
	Name			Position	
	Address	City		State	Zip
	2 Name			Position	
	Address	City		State	Zip
6. Duration (optional):	The	duration of the company shall be perpetual			
	The	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.