



State of Utah
 Department of Commerce
 Division of Corporations & Commercial Code
 Certificate of Organization (Professional Services Limited Liability Company)

Important: Read instructions before completing form

1. Name of Limited Liability Company:					
2. Principal office address: Street Address Required		Address	City	State Zip	
3. Profession Service Provided:					
4. The name of the Registered Agent (Individual or Business Entity or Commercial Registered Agent):					

<i>The address must be listed if you have a non-commercial registered agent. See instructions for further details.</i>					
Address of the Registered Agent: _____					
Utah Street Address Required, PO Boxes can be listed after the Street Address					
City:		State	UT	Zip:	
5. Name and signature of Organizer (attach additional pages if needed)					
Name:		Signature:			
6. Name and Address of Members and/or Managers (required):	1. _____		_____		
	Name		Position		
	Address		City	State	Zip
	2. _____		_____		
6. Name and Address of Members and/or Managers (required):	Name		Position		
	Address		City	State	Zip
	3. _____		_____		
	Name		Position		
Address		City	State	Zip	
7. Duration (optional);		The duration of the company shall be perpetual			
		The duration of the company shall be _____			

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.