



State of Utah
 Department of Commerce
 Division of Corporations & Commercial Code
 Articles of Organization

Important: Read instructions before completing form

Non-Refundable Processing Fee: \$70.00

1. <u>Name of Limited Liability Company:</u>			
2. <u>Purpose:</u>			
<p>3. Who/What is the Registered Agent (Individual or Business Entity or Commercial Registered Agent)?:</p> <hr/> <p>The address must be listed if you have a non-commercial registered agent. See instructions for further details.</p> <p>Address of the Registered Agent: _____</p> <p style="text-align: center;">Utah Street Address Required, PO Boxes can be listed after the Street Address</p> <p>City: _____ State UT Zip: _____</p>			
4. <u>Organizer(s)</u>	The company <u>does</u> <u>does not</u> have organizers who are not members or managers of the company.		
5. <u>Name and Address of each Organizer who is not a member or manager</u> <small>(attach additional page if needed)</small>	<p>1. _____</p> <p>Name _____</p> <p>Address _____ City _____ State _____ Zip _____</p> <p>Signature: _____</p>		
6. <u>Management:</u>	The company will be <u>manager</u> <u>member</u> managed.		
7. <u>Name and Address of Members/Managers:</u> <small>(attach an additional page if there are more than 2 members and/or managers)</small>	<p>1. _____</p> <p>Name _____ Position _____</p> <p>Address _____ City _____ State _____ Zip _____</p> <p>Signature: _____</p> <p>2. _____</p> <p>Name _____ Position _____</p> <p>Address _____ City _____ State _____ Zip _____</p> <p>Signature: _____</p>		
8. <u>Duration</u> <small>(may not exceed 99 years)</small>		The duration of the company shall be _____ years.	
		The duration date of the company shall be _____	
9. <u>Principal Address:</u>	<p>_____</p> <p>Address _____ City _____ State _____ Zip _____</p>		
<p>Under GRAMA {63-2-201}, 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.</p>			
<p>Optional Inclusion of Ownership Information: This information is not required.</p>			
Is this a female owned business?	Yes	No	
Is this a minority owned business?	Yes	No	If yes, please specify: _____