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### Information for New Corporation, LLC or Association

**Person Ordering:**

Name:	Telephone Number:
Mailing Address:	Email Address:

**Type of Entity:**

<input type="checkbox"/> Corporation	<input type="checkbox"/> Non-Profit Corporation	<input type="checkbox"/> Limited Liability Company
<input type="checkbox"/> Series Limited Liability Co. No. of Initial Series: _____ Names of Initial Series: (1) _____ _____ (2) _____ _____ (3) _____ _____	<input type="checkbox"/> Professional Corporation Select Profession <input type="checkbox"/> Accounting <input type="checkbox"/> Engineering <input type="checkbox"/> Vet. Medicine <input type="checkbox"/> Architecture <input type="checkbox"/> Physical Therapy <input type="checkbox"/> _____ _____	<input type="checkbox"/> Professional Association Select Profession: <input type="checkbox"/> Medicine <input type="checkbox"/> Podiatry <input type="checkbox"/> Optometry <input type="checkbox"/> Chiropractic <input type="checkbox"/> Clinical Social Wk <input type="checkbox"/> Marriage/Family Counseling <input type="checkbox"/> Osteopathy <input type="checkbox"/> Dentist <input type="checkbox"/> Therapeutic Optometry <input type="checkbox"/> Psychology <input type="checkbox"/> Prof. Counseling

**Name of Entity:**

**Principal Business Address:**

First Choice:	Street/P.O.Box:
Second Choice:	
Third Choice:	
Tel No:	

**Note:** The name of a corporation must end with "Inc.", "Corp", or "Corporation". A professional corporation name must include "P.C" or "Professional Corporation" and a professional association must include "P.A" or "Professional Association". A limited liability company name must include "LLC" or "Limited Liability Company".

**Assumed Name(s):**

If the entity will operate or conduct business under any name other than its full legal name (including the Inc., LLC, PA, etc at the end of the legal name, you will need to file an assumed name certificate. Please provide any assumed names which will be used:

**Directors/Managers** (The board of directors or managers manages the corporation or company. Limited liability companies can be managed by its members but we require that corporations and associations be managed by a board of directors. Only one director/manager is required. If you are forming an LLC and do not want

to name managers, leave this section blank.)

Name:	Address/Tel No:

**Officers of Corporation or Company:** We require all corporations and associations to name at least a president and secretary. An LLC may elect not to have officers. If you are creating an LLC and do not want officers, leave this section blank. For all others, please name a president and secretary. You may also name a vice president and treasurer. All offices may be held by one person.

Title:	Name:	Address/Tel No:
President		
Secretary		
Vice=President		
Treasurer		

**Members/Shareholders:** (Members or shareholders own the corporation, company or association. Please list all owners.)

Name:	Address & Tel Number:	Number of Shares	Share Purchase Price
			\$
			\$
			\$
			\$
			\$
			\$

**Registered Agent and Registered Office:** (All entities must have a registered agent and office to receive official notifications which affect the entity. This must be a physical address. P.O. boxes are not acceptable. Anytime this address changes, the Secretary of State must be notified.)

Name of Registered Agent:	Address/ Tel No:

**Tax Matters Member:** (All entities must have a tax matters member who is responsible for receiving official notifications which affect the entity. This must be a physical address. P.O. boxes are not acceptable. Anytime this address changes, the IRS must be notified.) Please provide an address you wish to receive mail if it is dif-

ferent than the business address.

Name of Tax Matters Member:	Address / Tel No:

**Annual Meeting:** (Corporations and associations are required to have annual meetings of the shareholders/members and board of directors. LLC's are not required to have an annual meeting.) Select the month for annual meetings if one is required. If you do not select a month, we will use March.

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Select from the following options as appropriate. The Corporation/Company/Association will:

<input type="checkbox"/> Hire employees	<input type="checkbox"/> Obtain licenses or permits to operate e.g.
<input type="checkbox"/> Purchase insurance	<input type="checkbox"/> Sales tax permit, etc
<input type="checkbox"/> Lease vehicles	<input type="checkbox"/> Other:

**Additional Information:** (Please provide any additional information relevant to the entity you want to create.)

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