



Incorporate Me, LLC

Corporation & LLC Formation Intake Form

Applying for

C Corporation: _____ S Corporation: _____ LLC: _____
 Sole Prop: _____ General Partnership: _____

Check Name Availability

Checked Name Availability: Yes No

(Please check the California Secretary of State website to ensure the name is available.)

Proposed Business Name: _____

Business Information

Business Name: _____

Type of Business: _____

Email: _____

Fax Number: _____

Shareholder / Member

Name: _____

Address: _____

SSN: _____ Telephone: _____

% Owned: _____

Shareholder / Member (Additional 1)

Name: _____

Address: _____

SSN: _____ Telephone: _____

% Owned: _____



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Shareholder / Member (Additional 2)

Name: _____
Address: _____
SSN: _____ Telephone: _____
% Owned: _____

Shareholder / Member (Additional 3)

Name: _____
Address: _____
SSN: _____ Telephone: _____
% Owned: _____

Officers of Corporation

President: _____
Vice President: _____
Treasurer: _____
Secretary: _____

Person Providing Information

Name: _____
Title: _____
Telephone Number: _____

Acknowledgment & Signature

I confirm that the information provided is accurate and complete to the best of my knowledge.

Signature: _____
Date: _____

Disclaimer:

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