Business Formation Questionnaire

Owner #1 Name:		
Address:		
SSN:		
Phone#:		
Preferred Title (Pres. Or CEO common)		
Ownership %:		
Owner #2 Name:		
Address:		
SSN:		
Phone#:		
Preferred Title (Vice Pres,		
CFO, COO common)		
Ownership %:		
Business Name:		
EIN (if you have one)		
doing business as - DBA (if a	pplicable)	
Operating Agreement Qu	uestions:	
	reholder vote required to approve the motions of the LLC?	
What is the percentage of sha	reholder vote required to approve changes in the ownership of the company?	
Please list the company	representative(s) that will have signature authority on company financial accounts.	
Business Client's Pre-	ferred Method of Contact:	
Phone#:		
Email:		
Mailing address:		
		RANGEVIEW TAX & ACCOUNTING