SECRETARY OF THE STATE OF CONNECTICUT

MAILING ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, P.O. BOX 150470, HARTFORD, CT 06115-0470
DELIVERY ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, 30 TRINITY STREET, HARTFORD, CT 06106
PHONE: 860-509-6003 **WEBSITE:** www.concord-sots.ct.gov

ARTICLES OF ORGANIZATION

LIMITED LIABILITY COMPANY - DOMESTIC

C.G.S. §§34-120; 34-121

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH 81/2 X 11 SHEETS IF NECESSARY.

FILING PARTY *(CONFIRMATION WILL BE SENT TO THIS ADDRESS)*:

NAME:

ADDRESS:

CITY:

STATE: ZIP:

FILING FEE: $120

MAKE CHECKS PAYABLE TO "SECRETARY OF THE STATE"

1. NAME OF LIMITED LIABILITY COMPANY - REQUIRED: (MUST INCLUDE BUSINESS DESIGNATION I.E. LLC, L.L.C., ETC.)

2. DESCRIPTION OF BUSINESS TO BE TRANSACTED OR PURPOSE TO BE PROMOTED - REQUIRED:
ATTACH 81/2 X 11 SHEETS IF NECESSARY.

3. LLC'S PRINCIPAL OFFICE ADDRESS - REQUIRED: *(NO P.O. BOX)* PROVIDE FULL ADDRESS. "SAME AS ABOVE" NOT ACCEPTABLE.

ADDRESS:

CITY:

STATE: ZIP:

4. MAILING ADDRESS, IF DIFFERENT THAN #3: PROVIDE FULL ADDRESS. "SAME AS ABOVE" NOT ACCEPTABLE.

ADDRESS:

CITY:

STATE: ZIP:

5. APPOINTMENT OF STATUTORY AGENT FOR SERVICE OF PROCESS - REQUIRED: *(COMPLETE A OR B NOT BOTH)*

☐ **A. IF AGENT IS AN INDIVIDUAL.**
PRINT OR TYPE FULL LEGAL NAME:

BUSINESS ADDRESS *(P.O. BOX NOT ACCEPTABLE) IF NONE, MUST STATE "NONE"*	**CONNECTICUT RESIDENCE ADDRESS** *(P.O. BOX NOT ACCEPTABLE)*
ADDRESS:	ADDRESS:
CITY:	CITY:
STATE:	STATE:
ZIP:	ZIP:

SIGNATURE ACCEPTING APPOINTMENT:

FORM LC-1-1.0
Rev. 1/1/2015

☐ **B. IF AGENT IS A BUSINESS:**
PRINT OR TYPE NAME OF BUSINESS AS IT APPEARS ON OUR RECORDS:

CT BUSINESS ADDRESS *(P.O.BOX UNACCEPTABLE)*

ADDRESS:

CITY:

STATE: ZIP:

SIGNATURE ACCEPTING APPOINTMENT ON BEHALF OF AGENT:

PRINT NAME & TITLE OF PERSON SIGNING:

6. MANAGER OR MEMBER INFORMATION-*REQUIRED:* *(MUST LIST AT LEAST ONE MANAGER OR MEMBER OF THE LLC.) ATTACH 81/2 X 11 SHEETS IF NECESSARY.*

NAME	TITLE	BUSINESS ADDRESS (No. P.O Box) *IF NONE, MUST STATE "NONE"*	RESIDENCE ADDRESS: (No. P.O Box)

7. MANAGEMENT - PLACE A CHECK NEXT TO THE FOLLOWING STATEMENT ONLY IF IT APPLIES

☐ MANAGEMENT OF THE LIMITED LIABILITY COMPANY SHALL BE VESTED IN A MANAGER OR MANAGERS

8. ENTITY EMAIL ADDRESS-REQUIRED: *(IF NONE, MUST STATE "NONE.")*

9. EXECUTION: ***(SUBJECT TO PENALTY OF FALSE STATEMENT)***

DATED THIS _____ **DAY OF** _____ **, 20** _____

NAME OF ORGANIZER (PRINT OR TYPE)	SIGNATURE

AN ANNUAL REPORT WILL BE DUE YEARLY IN THE ANNIVERSARY MONTH THAT THE ENTITY WAS FORMED/REGISTERED AND CAN BE EASILY FILED ONLINE @ www.concord-sots.ct.gov
CONTACT YOUR TAX ADVISOR OR THE TAXPAYER SERVICE CENTER AT THE DEPARTMENT OF REVENUE SERVICES AS TO ANY POTENTIAL TAX LIABILITY RELATING TO YOUR BUSINESS, INCLUDING QUESTIONS ABOUT THE BUSINESS ENTITY TAX.
TAX PAYER SERVICE CENTER: (800) 382-9463 OR (860) 297-5962 OR GO TO www.ct.gov/drs

INSTRUCTIONS

1. Name of Limited Liability Company-REQUIRED: The name MUST INCLUDE business designation, such as Limited Liability Company, LLC, L.L.C., Limited Liability Co., Ltd. Liability Company, or Ltd. Liability Co., and the name must be distinguishable from all other active business names on record with this office.

2. Nature of Business-REQUIRED: It is sufficient to state that the purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be formed under the Connecticut Limited Liability Company Act.

3. Principal Office-REQUIRED: Include street number, street, city, state and zip code.

4. Mailing Address-OPTIONAL: Fill in an address other than the principal business address if you would like the annual report sent elsewhere.

5. Appointment of statutory agent for process-REQUIRED: THE LIMITED LIABILITY COMPANY MAY NOT BE ITS OWN AGENT. An individual or entity (other than this LLC) must be appointed to accept legal process, notice or demand served upon the limited liability company. The agent may be EITHER:

a. Any individual who is a resident of Connecticut, including a manager or member of the LLC.
   - An individual must provide the complete street address of his or her business and a Connecticut residence address.
     (If no business address, must state none).
   - The agent must sign accepting the appointment.

or

b. One of the following business types, on record with this office, with a Connecticut address:
   - A Connecticut corporation, limited liability company, limited liability partnership or statutory trust.
   - A foreign corporation, limited liability company, limited liability partnership or statutory trust, which has obtained a certificate of authority to transact business in Connecticut and has a Connecticut address on file with this office.
     - Provide the Connecticut principal office address in the block designated for “Business address”. The agent must sign accepting the appointment and the person signing on behalf of a business must print his/her name and title next to his/her signature.

6. Manager or member information-REQUIRED: The limited liability company must list the name, title, business and residence address of at least one manager or member of the limited liability company. (if no business address, must state none). Include street number, street, city, state and zip code. (Additional member(s) and manager(s) information may be included on an attached 8 ½ x 11 sheet.)

7. Management: If the limited liability company is to be managed by its member(s) do not check the box.

8. Entity Email Address-REQUIRED: If none, must state "NONE". The Secretary must notify entities via email when their Annual Reports are due.

9. Execution-REQUIRED: The organizer must print or type his or her full legal name and provide a signature. Note that the execution is made under the penalties of false statement, certifying that the information provided in the document is true. *THE LIMITED LIABILITY COMPANY MAY NOT BE ITS OWN ORGANIZER BUT A MANAGER/MEMBER MAY BE THE ORGANIZER.

.***YOU ARE REQUIRED TO FILE ARTICLES OF DISSOLUTION IF YOU DISSOLVE YOUR BUSINESS. ***

Note: LLC’s may have as many managers/members as they wish. However, only three will be shown on the database. Additional names will be available by requesting copies of the original filing.