

**New Jersey Department of State
Division of Commercial Recording
Certificate of Formation, Limited Liability Company**

This form may be used to record the formation of a Limited Liability Company under and by virtue of New Jersey State law. Applicants must insure strict compliance with NJSA 42, the New Jersey Limited Liability Company Act, and insure that all applicable filing requirements are met. Applicants are advised to seek out private legal assistance before submitting filings to the Secretary's office.

1. Name of Limited Liability Company:
2. The purpose for which this Limited Liability Company is organized is:
3. Date of formation:
4. Registered Agent Name & Address (must be in NJ):
5. Dissolution date:
6. Other provisions (list below or attach to certificate):

The undersigned represent(s) that this Limited Liability Company has two or more members, and that this filing complies with requirements detailed in NJSA 42. The undersigned hereby attest(s) that they are authorized to sign this certificate on behalf of the Limited Liability Company.

Name

Date

Instructions: Type all information except **signatures**.

Form must be completed and filed in duplicate.

The original document will be retained by the Division of Commercial Recording.

Remittance: Check or Money Order should be signed and made payable to the **Secretary of State**, and be submitted with the document to be filed.

Filing Fee: \$ * Expedited Fee: \$ additional

Address: **** Regular Service * Expedited Service**

(by regular mail)

(by messenger or in person)

Department of State

Department of State

Division of Commercial Recording, Division of Commercial Recording

CN 308

820 Bear Tavern Rd., 2nd Floor

Trenton, NJ 08625

Trenton, NJ 08628

* Expedited Service requests must be delivered in person or by messenger service such as Federal Express, Emery, UPS, or any overnight service, **but not** U.S. Postal Service Overnight because it does not directly deliver to our division office.

** Please use zip code **08625** for regular mail. Regular mail wrongly addressed to the "Expedited Service" zip code **08628** will be returned "undeliverable" by the local Post Office.

Certificate of Formation, Limited Liability Company
Title 42 New Jersey Business Corporation Act

1. NAME OF LIMITED LIABILITY COMPANY: LLC name must include the words "Limited Liability Company" or the abbreviation "L.L.C.".
2. PURPOSE: This is an optional field.
3. DATE OF FORMATION: May be left blank. If this field is left blank, the date of formation will be the date on which the Certificate of Formation is filed in the Office of the Secretary of State.
4. REGISTERED AGENT AND ADDRESS: May be an individual resident of this State whose business office is identical with the LLC's registered office, or a domestic or foreign authorized corporation having a business address identical with the LLC's registered office. Office must be located in this State.

5. DISSOLUTION DATE: If desired, enter the specific date of dissolution in this field.

THE PURPOSE OF THIS FORM IS TO SIMPLIFY THE FILING
REQUIREMENTS OF THE SECRETARY OF STATE AND DOES NOT
REPLACE THE NEED FOR COMPETENT LEGAL ADVICE.