

State of New Hampshire

CERTIFICATE OF FORMATION
NEW HAMPSHIRE PROFESSIONAL LIMITED LIABILITY COMPANY
INSTRUCTIONS FOR COMPLETING FORM PLLC-1 (RSA 304-C:31 & RSA 304-D)

NINE STEPS TO AVOID REJECTION

1. The form must be legibly printed or typed on 8.5" x 11" paper and maintain 1" margins. Pencil or erasable ink is not acceptable.
2. **Article First:** RSA 304-D:6 I requires the name of a professional limited liability company end in Professional Limited Liability Company, P.L.L.C. or similar abbreviations.
3. Principal business information is optional and is not part of article first. The registered agent address will be used as the principal office address if no principal office address is listed.
4. **Article Second:** Refer to RSA 304-D:1 for permissible purposes of a professional limited liability company. We cannot accept a general clause such as "any lawful activity". You need to include a descriptive word.

RSA 304-D:1 VI "Professional service" means any service which may lawfully be rendered only by certified public accountants, public accountants, architects, attorneys, podiatrists, chiropractors, dentists, pharmacists, professional engineers, land surveyors, registered professional nurses, optometrists, physicians and surgeons, psychologists, veterinarians, and all other professionals licensed, registered, certified, or otherwise authorized and permitted to practice independently under the provisions of RSA 309-B, 310-A, 311, 315, 316-A, 317-A, 318, 326-B, 327, 329, 329-B, 330-A, or 332-B.
5. **Article Third:** Per RSA 304-C:36, a registered agent and registered office must be provided. The registered agent must reside in New Hampshire. The registered agent is the person who would receive service of process should the limited liability company be sued. The registered office is the registered agent's business address where the registered agent can be found for in-hand service of process. **A street/physical address must be provided. Your application will not be processed without an agent named or if an out of state address is listed.**
6. **Article Fourth:** The certificate of formation must state whether or not management is vested in a manager(s). If management is vested in a manager(s), the line must be completed with "is". If the management is not vested in a manager(s), the line must be completed with "is not". **"Is" or "is not" are the only two acceptable entries.**
7. The title and printed name of the person signing the documents must be stated beside or below his/her signature. The document shall be signed by a "manager" and if there is no manager, by a "member" or see RSA 304-C:28 V for alternative signatures. Example: If Article Fourth states "is not", the title of the person signing should be member. If Article Fourth indicates "is", the title should be manager.
8. The total filing fee to register is \$100.00, payable to the State of New Hampshire.
9. Any other matters the members decide to include may be added. If more space is needed, attach additional pages.

PLEASE NOTE: The name will be searched for availability upon receipt of these documents. If the filing has been accepted, you will receive a filed-stamped copy within 30 days. If you do not receive an acknowledgement, please contact our office. Checks are deposited upon receipt. If the check has been cashed, it only indicates we have received the document. A cashed check is not an indication that the document has been accepted and filed. Please call the Corporation Division (603-271-3246) with any questions you may have regarding this application.

Mailing Address - Corporation Division, NH Dept. of State, 107 N Main St, Rm 204, Concord, NH 03301-4989
Physical Location - State House Annex, 3rd Floor, Rm 317, 25 Capitol St, Concord, NH

State of New Hampshire

Filing fee: \$100.00
Use black print or type.

Form PLLC-1
RSA 304-C:31
& RSA 304-D

CERTIFICATE OF FORMATION NEW HAMPSHIRE PROFESSIONAL LIMITED LIABILITY COMPANY

The undersigned, under the New Hampshire Limited Liability Company laws submits the following certificate of formation:

FIRST: The name of the professional limited liability company is _____
_____.

Principal Business Information:

Principal Office Address: _____
(no. & street) (city/town) (state) (zip code)

Principal Mailing Address (if different): _____
(no. & street) (city/town) (state) (zip code)

Business Phone: _____

Business Email: _____

Please check if you would prefer to receive the courtesy Annual Report Reminder by email.

SECOND: Describe the nature of the professional services as defined in RSA 304-D, including necessary related services, for which the professional limited liability company is organized (and if known, list the NAICS Code and Sub Code): _____
_____.

THIRD: The name of the professional limited liability company's registered agent is: _____
_____.

The complete address of its registered office (agent's business address) is:

(no. & street) (city/town) (state) (zip code)

FOURTH: The management of the professional limited liability company _____ vested in a manager or managers.

MANAGER / MEMBER INFORMATION (List all Managers and/or Members you wish to be placed on record)		
NAME	BUSINESS ADDRESS	TITLE

*Signature: _____

Print or type name: _____

Title: _____
 (Enter "manager" or "member")

Date signed: _____

Note: The sale or offer for sale of membership interests of the limited liability company will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B). The membership interests of the limited liability company: 1) have been registered or when offered will be registered under RSA 421-B; 2) are exempted or when offered will be exempted under RSA 421-B; 3) are or will be offered in a transaction exempted from registration under RSA 421-B; 4) are not securities under RSA 421-B; OR 5) are federal covered securities under RSA 421-B. The statement above shall not by itself constitute a registration or a notice of exemption from registration of securities within the meaning of sections 448 and 461(i)(3) of the United States Internal Revenue Code and the regulation promulgated thereunder.

* The document shall be signed by a "manager" and if there is no manager, by a "member" or see RSA 304-C:28 V for alternative signatures.

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mailing Address - Corporation Division, NH Dept. of State, 107 N Main St, Rm 204, Concord, NH 03301-4989
Physical Location - State House Annex, 3rd Floor, Rm 317, 25 Capitol St, Concord, NH