



Wyoming Secretary of State

State Capitol Building, Room 110
200 West 24th Street
Cheyenne, WY 82002-0020
Ph. 307.777.7311
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For Office Use Only

**Limited Liability Company
Articles of Organization**

1. Name of the limited liability company:

2. Period of duration:

3. Purpose for which the limited liability company is organized:

4. Name and physical address of its registered agent:

*(The registered agent may be an individual resident in Wyoming, a domestic or foreign entity authorized to transact business in Wyoming, having a business office identical with such registered office. **The registered agent must have a physical address in Wyoming.** A Post Office Box or Drop Box is not acceptable. If the registered office includes a suite number, it must be included in the registered office address.)*

5. Mailing address of the limited liability company:

6. Principal office address:

7. The total amount of cash and a description and agreed value of property other than cash contributed:

8. The total additional contributions, if any, agreed to be made by all members and the times at which or events upon the happening of which they shall be made:

9. The right, if given, of the members to admit additional members, and the terms and conditions of the admission:

10. The right, if given, of the remaining members of the limited liability company to continue the business on the death, resignation, expulsion, bankruptcy or dissolution of a member or occurrence of any other event which terminates the continued membership of a member of the limited liability company:

11. **Complete either item #1 or item #2**

1) The limited liability company is to be managed by a manager or managers. The names and addresses of the managers who are to serve as managers until the first annual meeting of the members or until their successors are elected and qualify:

2) The management of the limited liability company is reserved to the members. The names and addresses of the members:

Signature: _____
(*Shall be executed by an organizer.*)

Date: _____
(*mm/dd/yyyy*)

Print Name:

Contact Person:

Daytime Phone Number:

Email:

Checklist

Filing Fee: \$100.00 Make check or money order payable to Wyoming Secretary of State.

The name must include the words "Limited Liability Company," or its abbreviations "LLC" or "L.L.C.," "Limited Company," or its abbreviations "LC" or "L.C.," "Ltd. Liability Company," "Ltd. Liability Co.," or "Limited Liability Co."

The Articles must be accompanied by a written consent to appointment executed by the registered agent.

For consistency the Secretary of State's Office will only keep one version of the agent's name on file.

Please submit one **originally signed** document and one exact photocopy of the filing.

Please review form prior to submitting to the Secretary of State to ensure all areas have been completed to avoid a delay in the processing of your documents.

Note:

To become a flexible limited liability company (W.S. 17-15-144), you must state in your articles that the company elects status as a flexible limited liability company pursuant to W.S. 17-15-107(a)(x). Please consult the appropriate professionals for further clarification and for assistance with making legal filings.

Other Requirements:

- An annual report will be due annually on the first day of the anniversary month of formation. If not paid within sixty (60) days from the due date, the entity will be subject to dissolution/revocation.



**Articles of Organization
Limited Liability Company
Statutory Information – January 2006**

W.S. 17-15-108 directs the Secretary of State to file articles of organization if it conforms to law. To that end, this document is designed to assist organizers in providing responsive answers and to avoid rejection of a filing.

W.S. 17-15-107(a) requires the articles of organization to set forth certain information with special reference to:

- W.S. 17-15-107 (a)(vi) - The total additional contributions, if any, agreed to be made by all members and the times at which or events upon the happening of which they shall be made. Acceptable responses include:
 - None
 - None at present. However, additional contributions may be made as agreed upon by the members in the future.
 - Unlimited and shall be made at such times and in such amounts as agreed upon by the members.
 - Specific dollar amount at such times as shall be agreed upon by the members.
 - The total additional contributions may be flexible as agreed upon by the members under the terms of the operating agreement.

- W.S. 17-15-107(a)(vii) - The right, if given, of the members to admit additional members, and the terms and conditions of the admission. Acceptable responses include:
 - None
 - May be admitted on such terms and conditions as all members may unanimously agree.
 - May be admitted with the consent of the majority of the members and in compliance with the operating agreement.
 - Consent of majority interest ownership upon such terms and conditions as set forth in the operating agreement.

- W.S. 17-15-107(a)(viii) - The right, if given, of the remaining members to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or occurrence of any other event which terminates the continued membership of a member in the company. Acceptable responses include:
 - Yes or No is all that is required for an answer.
 - Other wording is acceptable but unnecessary.



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Consent to Appointment by Registered Agent

I, _____, registered office located at _____
(name of registered agent)

voluntarily consent to serve

* *(registered office physical address, city, state & zip)*

as the registered agent for _____
(name of business entity)

I hereby certify that I am in compliance with the requirements of W.S. 17-28-101 through W.S. 17-28-111.

Signature: _____ **Date:** _____
(Shall be executed by the registered agent.) *(mm/dd/yyyy)*

Print Name: _____ Daytime Phone: _____

Title: _____ Email: _____

Registered Agent Mailing Address
 (if different than above):

***If this is a new address, complete the following:**

Previous Registered Office(s):

I hereby certify that:

- After the changes are made, the street address of my registered office and business office will be identical.
- This change affects every entity served by me and I have notified each entity of the registered office change.
- I certify that the above information is correct and I am in compliance with the requirements of W.S. 17-28-101 through W.S. 17-28-111.

Signature: _____ **Date:** _____
(Shall be executed by the registered agent.) *(mm/dd/yyyy)*

Checklist

Submit one **originally signed** consent to appointment and one exact photocopy.