

DATE OF ORDER	P.O. #	CONTACT PERSON
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CUSTOMER BILLING INFORMATION		CUSTOMER SHIPPING INFORMATION	
COMPANY NAME		COMPANY NAME	
STREET ADDRESS (REQUIRED FOR UPS SHIPMENT)		STREET ADDRESS (REQUIRED FOR UPS SHIPMENT)	
CITY, STATE AND ZIP		CITY, STATE AND ZIP	
PHONE NUMBER INCLUDING AREA CODE ( )	FAX NUMBER INCLUDING AREA CODE ( )	PHONE NUMBER INCLUDING AREA CODE ( )	FAX NUMBER INCLUDING AREA CODE ( )
SIGNATURE OF PURCHASER		SIGNATURE OF PURCHASER	
EMAIL ADDRESS FOR CONFIRMATION AND INVOICE		EMAIL ADDRESS FOR CONFIRMATION AND INVOICE	

## CORPORATE KIT SPECIFICATIONS

QUANTITY	BOOK TYPE & COLOR	BOOK SIZE	RETAIL PRICE
	<input type="checkbox"/> VINYL <input type="checkbox"/> BLACK <input type="checkbox"/> BROWN <b>OR</b> <input type="checkbox"/> LINEN <input type="checkbox"/> BLACK & GRAY <input type="checkbox"/> BLACK & BURGUNDY	<input type="checkbox"/> 1 1/4" (standard) <input type="checkbox"/> 1" (slim)	\$
COMPANY NAME CONFIGURATION		CORPORATE DOCUMENTS	RETAIL PRICE
<input type="checkbox"/> UPPER/LOWER CASE <input type="checkbox"/> ALL CAPS		<input type="checkbox"/> 50 BLANK PAGES <input type="checkbox"/> PRINTED MINUTES AND BYLAWS <input type="checkbox"/> OPERATING AGREEMENT	<b>FREE</b>
CERTIFICATE STYLE		CERTIFICATE COLOR	RETAIL PRICE
<input type="checkbox"/> TOP STUB <input type="checkbox"/> BIG BOARD EAGLE <input type="checkbox"/> BIG BOARD NO EAGLE		<input type="checkbox"/> BLUE <input type="checkbox"/> GREEN <input type="checkbox"/> BROWN	<b>FREE</b>
CERTIFICATES SIGNED BY			RETAIL PRICE
<input type="checkbox"/> PRESIDENT & SECRETARY <input type="checkbox"/> PRESIDENT & TREASURER <input type="checkbox"/> MEMBER & MANAGER <input type="checkbox"/> MEMBER & MEMBER <input type="checkbox"/> OTHER: _____			<b>FREE</b>

## COMPANY SPECIFICATIONS

COMPANY STRUCTURE	RETAIL PRICE
<input type="checkbox"/> CORPORATION <input type="checkbox"/> LLC <input type="checkbox"/> NON-PROFIT <input type="checkbox"/> CLOSE CORPORATION <input type="checkbox"/> PROFESSIONAL CORPORATION <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> LLP <input type="checkbox"/> LP <input type="checkbox"/> PROFESSIONAL LIMITED LIABILITY	<b>FREE</b>

## IMPRINT INFORMATION

COMPANY NAME (will appear on the book spine exactly as written below)
STATE OF FORMATION
YEAR OF FORMATION
AUTHORIZED SHARES
VALUE OF SHARES (IF ANY)

## SPECIAL INSTRUCTIONS - Attach additional sheet if necessary

## OPTIONAL ITEMS

<input type="checkbox"/> CORPORATE RUBBER STAMP	QTY _____	\$
<input type="checkbox"/> 20 ADDITIONAL CERTIFICATES	QTY _____	\$
<input type="checkbox"/> MULTIPLE CLASSES OF STOCK		\$

### SHIPPING METHOD

<input type="checkbox"/> FEDEX GROUND	\$
<input type="checkbox"/> FEDEX 2ND-DAY AIR	\$
<input type="checkbox"/> FEDEX OVERNIGHT	\$
<input type="checkbox"/> FEDEX OVERNIGHT - MORNING DELIVERY	\$
Not available for all destinations	

## TOTALING YOUR ORDER

<i>Please fax or mail in your order or call with any questions.</i>	SUBTOTAL	\$
	FLORIDA SALES TAX (ADD 6.5%)	\$
	SHIPPING	\$
	<b>TOTAL</b>	<b>\$</b>

## PAYMENT INFORMATION

I WILL PAY BY  CHECK (please allow to clear before processing)

CREDIT CARD ON FILE      LAST 4 DIGITS \_\_\_\_\_

NEW CREDIT CARD    Please email me secure link for payment  
 Please call me when you process my order

INVOICE (subject to prior credit approval)

THANK YOU FOR YOUR ORDER !