

Secretary of State
 Department of Business Services
 Limited Liability Division
 501 S. Second St., Rm. 351
 Springfield, IL 62756
 217-524-8008
 www.cyberdriveillinois.com

FAX: 217-524-3390

Illinois
 Limited Liability Company Act
**LLC Fax Transmittal Request Form
 for Certificates of Good Standing
 and/or Certified Copies of
 Documents**

This space for use by Secretary of State.

Approved: _____

FILE #

This space for use by Secretary of State.

1. Limited Liability Company Name: _____

2. Secretary of State File Number: _____

8 digits

Request for:

- Certificate of Good Standing\$25
- Expedited** Certificate of Good Standing\$45
- Certified Copy of Articles of Organization\$25
- Expedited** Certified Copy of Articles of Organization\$75
- Certified Copy of Other Document (list below)\$25
- Expedited** Certified Copy of Other Document (list below)\$75

Name of Document

Date Filed

In addition to the above fees, an additional \$2 payment processor fee will be charged when paying by credit card.

3. Credit Card (check one):

- Visa
- Mastercard
- Discover
- American Express

Account Number

Exp. Date

Exact Name of Card Holder: _____

Exact Billing Address of Account: _____

Name (if different from above)

Number

Street

Suite #

City

State

ZIP Code

Form LLC-50.25

4. Name and Daytime Phone Number of Contact Person:

Name	Telephone Number
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E-mail: _____

5. Mail to:

First Name	Middle initial	Last Name
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Number	Street	Suite #
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City	State	ZIP Code
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Expedited requests will be mailed within 24 hours. Unless express carrier account number is provided for billing to your account, the document(s) will be sent by regular mail to the address above.

Express Mail Carrier and Account Number: _____