



*(This form must be printed or typed in black ink)*

## ARTICLES OF ORGANIZATION OF

---

*(Insert name of Limited Liability Company)*

Under Section 203 of the Limited Liability Company Law

**FIRST:** The name of the limited liability company is:

---

**SECOND:** The county within this state in which the office of the limited liability company is to be located is: \_\_\_\_\_

**THIRD:** The Secretary of State is designated as agent of the limited liability company upon whom process against the limited liability company may be served.

The post office address to which the Secretary of State shall mail a copy of any process against the limited liability company served upon the Secretary of State by personal delivery is:

---

---

(Optional) The email address to which the Secretary of State shall email a notice of the fact that process against the limited liability company has been served electronically upon the Secretary of State is:

---

**FOURTH:** The purpose of the company is to engage in any lawful act or activity for which a company may be organized under the Limited Liability Company Law. The company is not formed to engage in any act or activity requiring the consent or approval of any state official, department, board, agency or other body without such consent or approval first being obtained.

This is where you would put in the entity's specific purpose(s) and selected disclaimers; **OR** if lack of sufficient space on this page, state, "See Attachment 'A'" here. (You will then add your OWN page(s) after this Department of State document.)



**Division of Corporations,  
State Records and  
Uniform Commercial Code**

New York State  
**Department of State**  
**DIVISION OF CORPORATIONS,  
STATE RECORDS AND  
UNIFORM COMMERCIAL CODE**  
One Commerce Plaza  
99 Washington Ave.  
Albany, NY 12231-0001  
<https://dos.ny.gov>

**X**

*(Signature of Organizer)*

*(Print or Type Name of Organizer)*

# ARTICLES OF ORGANIZATION OF

---

*(Insert name of Limited Liability Company)*

## Under Section 203 of the Limited Liability Company Law

Filer's Name and Mailing Address:

---

*Name:*

---

*Company, if Applicable:*

---

*Mailing Address:*

---

*City, State and Zip Code:*

### **NOTES:**

1. This form was prepared by the New York State Department of State for filing articles of organization for a domestic limited liability company. It does not contain all optional provisions under the law. You are not required to use this form. You may draft your own form or use forms available at legal stationery stores.
2. The Department of State recommends that legal documents be prepared under the guidance of an attorney.
3. The Limited Liability Company Law requires that the name end with "Limited Liability Company," "LLC" or "L.L.C." The name of the limited liability company must be uniformly stated throughout this certificate.
4. The filer may not be the limited liability company being formed.
5. The certificate must be submitted with a **\$200** filing fee made payable to the Department of State. Preferred payment methods include money order, Visa or Mastercard.

---

*(For Office Use Only)*

**Attachment 'A':** *(Please include this label on this additional page and be sure to reference it in your document under paragraph Fourth)*

If space is limited in the New York Department of State document, this is where you would list the entity's specific purpose(s) (i.e. what the entity plans to do in the State of New York).

This is also where you would list any applicable disclaimers and you can find those listed under question number 5 at <https://www.counsel.nysed.gov/consents/ques>.

Number the pages of this attachment if the attachment is greater than ONE page.