



STATE OF MONTANA

ARTICLES of ORGANIZATION for DOMESTIC LIMITED LIABILITY COMPANY [35-8-202, MCA](#)

MAIL: Secretary of State
P.O. Box 202801
Helena, MT 59620-2801
PHONE: (406) 444-3665
FAX: (406) 444-3976
WEB SITE: sos.mt.gov

Prepare, sign, and submit with an original signature and filing fee.
This is the minimum information required.

(This space for Secretary of State use only)

Required Filing Fees:
Standard \$ 70.00
24 Hour Priority \$ 90.00
1 Hour Expedite \$170.00

Make checks payable to Secretary of State.
If the document is hand written, please print legibly or the application may be denied.

Check One Box:

- Limited Liability Company
- Professional Limited Liability Company

1. The name of the Limited Liability Company: _____
(Must contain "limited liability company," "limited company" or if Professional, "professional limited liability company," or an abbreviation.)

2. The Limited Liability Company is (**check one**):
 At Will Term If Term, the latest date on which the LLC is to dissolve: _____

3. The business mailing address of its principal office: _____
City: _____ State: _____ Zip Code: _____

4. The name of the entity's Commercial Registered Agent for service of process in Montana:
(A list of Commercial Registered Agents is available at: <http://sos.mt.gov/Business/Agents/index.asp>.)
Name: _____

Or, the name and address of the entity's Noncommercial Registered Agent for service of process in Montana:
Name: _____

Actual Street Address or Rural Route Box Number in Montana: (**Must be an actual geographic location.**)

City: _____ Zip Code: _____

And, a mailing address in Montana, if different:

City: _____ Zip Code: _____

Appointment of a Registered Agent is affirmation of the Registered Agent's consent to serve as Registered Agent.

5. The Limited Liability Company will be managed by (**check one**): Manager(s) Member(s)

6. The names and business mailing addresses of the Managers or Members: For additional names and addresses attach a separate sheet of paper.

Name Business Mailing Address

Name Business Mailing Address

Name Business Mailing Address

7. If one or more members of the company are liable for the LLC's debts and obligations under [35-8-304\(3\), MCA](#), please attach a list of liable members and written consents of each.
8. If a Professional Limited Liability Company, the services to be provided ([35-8-1301, MCA](#)):

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9. **I, HEREBY SWEAR AND/OR AFFIRM**, under penalty of law, including criminal prosecution, that the facts contained in this document are true.

Signature of Organizer Date

Printed Name Title

10. Daytime Contact: Phone _____ Email _____

HELP SHEET: Articles of Organization for Domestic Limited Liability Company

For a Professional Limited Liability Company, at least half of the managers must be qualified persons with respect to the limited liability company. ([35-8-1303, MCA](#))

[ANNUAL REPORTS](#)

Annual reports must be filed with the Secretary of State prior to April 15 each year beginning the year following the organization and each year thereafter. Each year the Secretary of State will mail a notice that the Annual Report is due to the Limited Liability Company's registered agent.