

## Worksheet for Preparation/Filing of NY Corporation/LLC Merger into Surviving LLC

Date: \_\_\_\_\_

**1. Original Name, Current Name and Original NYS filing dates of Entities:**

a. Original Name: \_\_\_\_\_

Current Name: \_\_\_\_\_

NYS Filing Date: \_\_\_\_\_

b. Original Name: \_\_\_\_\_

Current Name: \_\_\_\_\_

NYS Filing Date: \_\_\_\_\_

2. Name of surviving LLC: \_\_\_\_\_

3. Future Effective Date (if different from date of filing): \_\_\_\_\_

4. Service of Process Address (supersedes any previous address):

\_\_\_\_\_  
\_\_\_\_\_

5. Business address where a member can obtain a copy of the merger agreement:

\_\_\_\_\_  
\_\_\_\_\_

6. Names of member authorizing the merger of each entity:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Fee to Prepare and File:	\$ 175.00
Disbursement to Dept. of State (filing)	\$ 85.00
Administrative Handling	\$ 5.00
Total:	\$ 265.00

Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Firm / Business Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Billing/Mailing Address: \_\_\_\_\_

Address for delivery of Corporate Documents:

Let this letter serve as my authorization to charge Amex/MC/Visa (*Initial Here*) \_\_\_\_\_

Card #: \_\_\_\_\_ Expires: \_\_\_\_\_

IN THE AMOUNT OF: \_\_\_\_\_

Print Name of Card Holder: \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_