

MANAGER STRUCTURE ATTACHMENT

1. ENTITY NAME – give the exact name of the LLC (foreign LLCs – give name in domicile state or country):

2. MANAGERS / MEMBERS – give the name and address of each and every **manager** and list all **members who own 20% or more** of the profits or capital of the LLC. **Use one block per person.** Check the appropriate box or boxes below each person listed. If more space is needed, use another [Manager Structure Attachment](#) form.

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| <p>1.</p> <p>Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City <input style="width: 150px;" type="text"/> State or Province Zip</p> <p>Country</p> <p><input type="checkbox"/> Manager <input type="checkbox"/> Member</p> | <p>2.</p> <p>Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City <input style="width: 150px;" type="text"/> State or Province Zip</p> <p>Country</p> <p><input type="checkbox"/> Manager <input type="checkbox"/> Member</p> |
| <p>3.</p> <p>Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City <input style="width: 150px;" type="text"/> State or Province Zip</p> <p>Country</p> <p><input type="checkbox"/> Manager <input type="checkbox"/> Member</p> | <p>4.</p> <p>Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City <input style="width: 150px;" type="text"/> State or Province Zip</p> <p>Country</p> <p><input type="checkbox"/> Manager <input type="checkbox"/> Member</p> |
| <p>5.</p> <p>Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City <input style="width: 150px;" type="text"/> State or Province Zip</p> <p>Country</p> <p><input type="checkbox"/> Manager <input type="checkbox"/> Member</p> | <p>6.</p> <p>Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City <input style="width: 150px;" type="text"/> State or Province Zip</p> <p>Country</p> <p><input type="checkbox"/> Manager <input type="checkbox"/> Member</p> |