

SERVICO, INC.
P.O. Box 871
ALBANY, NEW YORK 12201
518.463.4179 / 518.463.3752 : FAX

**WORKSHEET FOR PREPARATION/FILING OF NEW YORK
CERTIFICATE OF CHANGE/LLC**

CURRENT NAME OF THE LLC:

ORIGINAL NAME (if previously amended)

DATE OF FORMATION:

NEW ADDRESS FOR SERVICE OF PROCESS: (if applicable)

New County Designation (If Applicable)

Name and Title of Person(s) Authorizing Change (usually the name of a member or manager)

FEES:

PREPARE AND FILE

\$ 75.00

DISBURSEMENT TO DEPT. OF STATE (Filing)

\$ 30.00 Routine 55.00 Rush

ADMINISTRATIVE HANDLING

\$ 5.00

TOTAL

\$ 135.00Rush/\$110.00 Routine

Your Name: _____

Your Firm: _____

Billing/Mailing Address: _____

Your Phone #: _____

Your Fax #: _____

Let This Letter Serve as My Authorization to Charge My Amex/MC/Visa (Initial Here) _____

Card # _____ Expires _____ IN THE AMOUNT OF ** _____

Print Name of Card Holder: _____

Print Complete Billing Address on Credit Card: _____

Signature of Card Holder: _____

** Please note: This fee is an estimate only. It is possible to incur additional disbursements in order to complete this order. If so the additional fees will be charged to this credit card.