

Statement of Protected Series Designation by a Virginia Limited Liability Company Instructions

Filing Requirements									
Required Fees	Filing Fee: \$100								
File Online Today	Paper Filing								
Visit https://cis.scc.virginia.gov to file the Statement of Protected Series Designation by a Series Virginia Limited Liability Company in real time. Questions? Visit the CIS help page at https://scc.virginia.gov/pages/CIS-Help for how-to guides, answers to frequently asked questions, and helpful videos.	Download from https://scc.virginia.gov/pages/Virginia-Limited-Liability-Companies complete, print, and mail or deliver to below address: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">State Corporation Commission</td> <td style="width: 50%;">Courier Delivery Address</td> </tr> <tr> <td>Clerk's Office</td> <td>1300 E. Main St, 1st floor</td> </tr> <tr> <td>P.O. Box 1197</td> <td>Richmond, VA 23219</td> </tr> <tr> <td>Richmond, VA 23218-1197</td> <td></td> </tr> </table>	State Corporation Commission	Courier Delivery Address	Clerk's Office	1300 E. Main St, 1 st floor	P.O. Box 1197	Richmond, VA 23219	Richmond, VA 23218-1197	
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P.O. Box 1197	Richmond, VA 23219								
Richmond, VA 23218-1197									
Pay online with a credit card or eCheck. No additional processing fees apply for filing online.	Include a check payable to State Corporation Commission. DO NOT SEND CASH.								

Specific Instructions

I Limited Liability Company Name

Insert the name of the series limited liability company establishing the protected series.

II Protected Series Name

The protected series' name must begin with the name of the limited liability company and contain the phrase "protected series" or the abbreviation P.S. or PS. The proposed name must be distinguishable from other entity names on record with the Commission. To check the availability of a proposed name, visit <https://cis.scc.virginia.gov>, or contact the Clerk's Office.

III Principal Office

The principal office is where the principal executive offices of the protected series are located. Only use a rural route and box number if a principal office has no street address. A post office box is not allowed.

Signature

The statement must be signed by a manager or other person who has been delegated the right and power to manage the business and affairs of the series limited liability company, or if no managers or such other persons have been selected, by any member of the series limited liability company.

The person signing the statement must print his or her name and the capacity in which he or she is signing (e.g., manager or member) beneath or opposite his or her signature. A person signing on behalf of a manager or member that is a business entity must set forth the business entity's name and its title with the series limited liability company, the individual's printed name, and the capacity in which he or she is signing on behalf of the business entity.

Providing an entity phone number or email address allows for quicker communication if there is an issue with the filing.

Important Information

The registered office and registered agent of a protected series is identical to the registered office and registered agent of the limited liability company that created it.

The statement must be in the English language, printed in black, using the following guidelines:

- use solid white paper
- one-sided
- size 8 1/2" x 11"
- no visible watermarks or background logos
- minimum 1.25" top margin and 0.75" all other sides

Do not include personally identifiable information, such as a Social Security number, in a business entity document submitted to the Office of the Clerk for filing with the Commission. Information in these documents is available to the public. For more information, see Notice Regarding Personally Identifiable Information at www.scc.virginia.gov/clk.



Statement of Protected Series Designation by a Virginia Limited Liability Company

State Corporation Commission

Pursuant to § 13.1-1095 A of the Code of Virginia, the undersigned, on behalf of the series limited liability company named below, states as follows:

I The name of the **series** limited liability company establishing the protected series is

SCC ID No. (optional) _____

II The name of the protected series being established is

(The protected series' name must begin with the name of the limited liability company in Article I and contain the phrase "protected series" or the abbreviation P.S. or PS)

III The protected series' principal office address, including the street and number, is

(number/street) (city or town) (state) (zip)

IV The establishment of the protected series was approved by the affirmative vote or consent of all members of the series limited liability company.

Signature

The person signing this document has been delegated the right and power to manage the series limited liability company's business affairs and affirms the above statements are true.

Signature	Printed Name	Title	Date	Tel. # (optional)	Email Address (optional)

Business Tel. # (optional)	Business Email Address (optional)

Required Fee: \$100