



# 2018 – BIENNIAL STATEMENT INSTRUCTION FORM

(New York LLCs)

IMPORTANT! FOLLOW INSTRUCTIONS EXACTLY WHEN COMPLETING THIS FORM. PLEASE PRINT.			
Customer ID Number	Notice Date 7/18/2018	DOS ID Number	Formation Date
Business Address			
			<b>Please Respond By:</b> <b>08/17/2018</b>
			

New York laws require limited liability companies registered to do business in the State to timely file a biennial statement every two years. If does not file a biennial statement within 60 days after the due date, it may be prevented from completing certain business transactions.

**LLCL § 301(e):** Unless the commissioner of taxation and finance and the secretary of state have otherwise agreed with the LLC, every limited liability company subject to the NY Limited Liability Law is required to biennially file a prescribed statement with the Dept. of State in the calendar month during which the LLC's articles of organization or application for authority were filed, or effective date thereof if stated.

If the business entity is still in use, **Workplace Compliance Services, a private entity, will assist for a fee in the** filing of your biennial statement.

**WORKPLACE COMPLIANCE SERVICES IS NOT A GOVERNMENT AGENCY AND DOES NOT HAVE A CONTRACT WITH ANY GOVERNMENTAL AGENCY TO PROVIDE THIS SERVICE.**

To utilize this service, follow the steps below. Workplace Compliance Services will not disclose any information about your business to any third-party, including competitors, unless required by force of law. Mail the completed form with \$90 in the enclosed envelope. **Please respond today!**

STEP 1. Verify the correctness of the pre-printed business information. Make any necessary changes and complete any missing information.		
LLC Name		DOS ID Number
Formation Date	Nature of Business (optional)	Filing Year

STEP 2. Service of Process information (If applicable)	
Service of Process Name	
Service of Process Address <b>**REQUIRED**</b> (Must be in U.S. or territories)	

STEP 3. PAYMENT INFORMATION
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<input type="checkbox"/> CHECK ENCLOSED FOR \$90	<b>Please make your check payable to:</b> <b>WORKPLACE COMPLIANCE SERVICES</b> 1843 Central Avenue #142 Albany, NY 12205	Further assistance: Call (877) 770-3555
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STEP 4. I authorize an electronic signature on behalf of the above-named LLC and understand that Workplace Compliance Services is not a government agency and is not providing legal advice.		
Signature (to be signed by an authorized member/manager) <b>**REQUIRED**</b>		Print Name Clearly
Email	Phone	Date

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for office  
use only

ND: 7/18/2018

CID:

Please Respond By 08/17/2018