V: Jan-13	Scorp/LLC Info Applic	JP2Consulting Inc				
PART I:	Personal Information					
	Legal Name	Social Security Nu	mber	Birthdate MM/DD/YY		
Type						
Or	Personal Address					
Print						
1 11110						
	street address city,		state,	zip		
Part II:	Contact Information					
	Personal Email Address	Business Email if I	Different	İ		
Type						
Or	Personal Contact Number	Business Contact Number if Different				
Print						
	Format: (XXX) XXX-XXXX	Format: (XXX) XXX-XXXX				
Part III:	Business Information					
	Business Name (Option One)	Business Name (C	ption T	wo)		
Type						
Or	Business Address if Different than Above					
Print						
	street address city,		state,	zip		
Dort IV.	Dayment Information					
Part IV:	Payment Information Card Number (Visa or MasterCard)	CC Cod	le	Expiration Date		
Type	Cara Hamber (Floa of Master Gara)	0000		Expiration Dato		
Or						
Print	Credit Card Billing Address if Different than Abo	ove				
1 11110						
	street address city,	Aft	state,	zip		
	Your Card will be charged a state fee of \$70 during process your paperwork JP Squared Consulting w			•		
I hereby auth	orize JP Squared Consulting Inc. to assi	st me in the creat	ion of a	a Utah Business		
Entity. The al	pove information may be used to do so u	nder the agreeme	ent tha	t all information		
remain privat	e. I authorize the payment of \$150 on m	y above credit car	d to pa	y for this		

consulting service, and the payment of \$70 to the State of Utah for filing.

Signature (Digital/Actual)

Email completed form to: jacob@jpsquaredinc.com

	User	RAC	EIN
Office Use Only			