



STATE OF SOUTH CAROLINA  
DEPARTMENT OF REVENUE  
**LIMITED LIABILITY CORPORATION (LLC)  
SUPPLEMENTAL INFORMATION FORM**

Check the number that applies and provide the requested information.

Name of the LLC applying for permit and/or license: \_\_\_\_\_

\_\_\_\_\_ 1. This LLC is managed by its **Members**:

\_\_\_\_\_ This LLC has an Operating Agreement and each **Member** is identified in the agreement. Attach the Operating Agreement.

\_\_\_\_\_ This LLC does **not** have an Operating Agreement. Listed below is the name of every **Member** that has an ownership interest in the LLC.

\_\_\_\_\_ 2. This LLC is managed by its **Managers**:

\_\_\_\_\_ This LLC has an Operating Agreement and each **Manager** or any members holding ownership of 25% or more is identified in the agreement. Attach the Operating Agreement.

\_\_\_\_\_ This LLC does **not** have an Operating Agreement. Listed below is the name of every **Manager** of the LLC or any members holding ownership of 25% or more.

Individual, LLC, or Corporation name	Title (member or manager)	Percentage of ownership

I, \_\_\_\_\_, upon being first duly sworn, **upon penalty of perjury**,  
print name

do hereby acknowledge and affirm that I have fully provided all information requested and the information is true and correct.

\_\_\_\_\_  
Principal's signature

**SWORN to and subscribed before me** this  
\_\_\_\_\_ day of \_\_\_\_\_, year of \_\_\_\_\_  
Notary Public for \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_  
Notary (legal signature) \_\_\_\_\_  
Notary (printed name) \_\_\_\_\_