

Protected-Series Designation

Robert B. Evnen, Secretary of State
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Lincoln, NE 68509
(402) 471-4079
www.sos.nebraska.gov

Name of Limited Liability Company _____

The undersigned hereby confirms an affirmative vote or consent of all members of the above-named Limited Liability Company to establish the following Protected Series:

Please fill out the below for each Protected Series to be established, please add additional pages as needed:

Please note the name(s) of the Protected Series must begin with the name of Series Limited Liability Company, and contain the phrase "Protected Series" or "protected series" or the abbreviations "P.S." or "PS".

Name of Protected Series	Cost
	\$100
	\$100
	\$100
	\$100
	\$100

Effective Date _____

Signature of Authorized Representative

Printed name of Authorized Representative