

APPLICATION FOR REGISTRATION  
PHYSICIAN ASSISTANT CORPORATION OR LIMITED LIABILITY COMPANY

**Only available for those licensed under SDCL 36-4A**

Instructions:

1. Contact Secretary of State and obtain Certificate
2. Submit to the Board office:
  - copy of Certificate - obtained from Secretary of State
  - Articles of Incorporation or Organization and Bylaws
  - Completed Application Form
  - \$50 Fee

NOTE:

1. Physician Assistant Corporation -- must state that all officers, directors, and shareholders are licensed pursuant to SDCL 36-4A.
2. Limited Liability Corporation -- it must state that all officers, members, and managers are licensed pursuant to SDCL 36-4A.

NAME OF APPLICANT CORPORATION OR LIMITED LIABILITY COMPANY:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

NAMES OF INCORPORATORS OR ORGANIZERS:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

NAMES OF SHAREHOLDERS OR MEMBERS (Indicate Directors with (\*))

_____	_____
_____	_____
_____	_____
_____	_____

OFFICERS OR MANAGERS

PRESIDENT \_\_\_\_\_

VICE PRESIDENT \_\_\_\_\_

SEC.-TRES. \_\_\_\_\_