

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. _____