

**NORTH CAROLINA PSYCHOLOGY BOARD**

895 State Farm Road, Suite 101, Boone, N.C. 28607  
Telephone: (828) 262-2258

**APPLICATION TO ADD MEMBERS TO  
PROFESSIONAL LIMITED LIABILITY COMPANY**

Name/Address of Professional Limited Liability Company: PLLC #: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Proposed name of additional MEMBERS(s):

Name	License No.
_____	_____
_____	_____
_____	_____

Submitted by : ( Must be one of the original Members)

\_\_\_\_\_  
Name Signature

\_\_\_\_\_  
Position

Signed before me this \_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Notary Public

My commission expires \_\_\_\_\_

**OFFICIAL  
SEAL**