

**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

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**Certificate of Election by Professional Association  
of Limited Liability Company Status**  
(15 Pa.C.S. § 8908)

Name		
_____		
Address		
_____		
City	State	Zip Code
_____	_____	_____

**Document will be returned to the name and address you enter to the left.**



Fee: \$125

In compliance with the requirements of 15 Pa.C.S. § 8908 (relating to election of professional association to become limited liability company), the undersigned, constituting all of the associates of a professional association, desiring to elect limited liability company status, hereby state that:

1. The name of the association is:

\_\_\_\_\_

2. The initial Articles of Association of the association were filed in the Office of the Prothonotary at \_\_\_\_\_ County, Pennsylvania.

3. The associates of the professional association have elected to accept the provisions of 15 Pa.C.S. Ch. 89 (relating to professional limited liability companies) for the government and regulation of the affairs of the association).

4. The provisions that constitute the initial certificate of organization of the limited liability company are set forth in full in Exhibit A attached hereto and made a part hereof.

IN TESTIMONY WHEREOF, the undersigned constituting all of the associates of the professional association, have executed this Certificate of Election of Limited Liability Company Status this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

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**Department of State  
Corporation Bureau  
P.O. Box 8722  
Harrisburg, PA 17105-8722  
(717) 787-1057  
web site: [www.dos.state.pa.us/corps](http://www.dos.state.pa.us/corps)**

**Instructions for Completion of Form:**

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$125 made payable to the Department of State.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
  - (1) Certificate of Organization (DSCB:15-8913)
  - (2) One copy of a completed form DSCB:134A (Docketing Statement).
  - (3) Any necessary copies of form DSCB:17.2.3 (Consent to Appropriation or Use of Similar Name).
  - (4) Any necessary governmental approvals.
- D. It is not necessary to execute the form DSCB:15-8913 attached as Exhibit A. The filing fee specified for this form includes the filing of such Exhibit A and an additional fee relating to form DSCB:15-8913 should not be tendered.
- E. This form and all accompanying documents shall be mailed to the address stated above.