

**VERIFICATION OF ELIGIBILITY FOR
PROFESSIONAL BUSINESS
ORGANIZATIONS**

Form VOE
Rev. 12/2017



West Virginia Secretary of State
Business & Licensing Division
Tel: (304)558-8000
Fax: (304)558-8381
Website: www.wvsos.gov

FILE ONE ORIGINAL
(Two if you want a filed stamped
copy returned to you.)

**Form must accompany the West Virginia Secretary of
State business registration (Articles of Incorporation,
Articles of Organization or foreign Certificate of
Authority registration below).**

FILING FEE: N/A

Name of Business*: _____

**Name of the business or organization being registered as listed in the Articles of Incorporation, Articles of Organization or Application for Certificate of Authority. The name must include an appropriate name ending as required by WV Code.*

Professional Business Organizations: In West Virginia, "Professional Service" means services rendered by the following professions: Attorneys-at-law under article two, physicians and podiatrists under article three, dentists under article four, optometrists under article eight, accountants under article nine, veterinarians under article ten, architects under article twelve, engineers under article thirteen, osteopathic physicians and surgeons under article fourteen, chiropractors under article sixteen, psychologists under article twenty-one, social workers under article thirty, acupuncturists under article thirty-six and land surveyors under article thirteen-a, all of chapter thirty of this code. (W.Va. Code [§31B-13-1301](#)) Depending on the limitations of the licensing professional board, professional business organizations may form as a "Professional Limited Liability Company", a Legal Corporation (W.Va. Code [§30-2-5a](#)), a Medical or Podiatry Corporation (W.Va. Code [§30-3-15](#)), an Accounting Corporation (W.Va. Code [§30-9-30](#)), or other professional business formation.

To form as any professional business organization listed below, the applicant must attach this VERIFICATION OF ELIGIBILITY (Form VOE) to one of the appropriate Secretary of State business registration applications listed below:

• The Professional Business Organization will be formed as (**Check One below**):

- Legal Corporation** - Form to accompany Articles of Incorporation ([CD-1](#)) or Foreign Corporation ([CF-1](#)).
- Medical Corporation** - Form to accompany Articles of Incorporation ([CD-1](#)) or Foreign Corporation ([CF-1](#)).
- Podiatry Corporation** - Form to accompany Articles of Incorporation ([CD-1](#)) or Foreign Corporation ([CF-1](#)).
- Accounting Corporation** - Form to accompany Articles of Incorporation ([CD-1](#)) or Foreign Corporation ([CF-1](#)).
- Professional Limited Liability Company** - Form to accompany Articles of Organization of LLC ([LLD-1](#)) or Foreign LLC ([LLF-1](#)).
- Limited Liability Partnership** - Form to accompany Statement of Limited Liability Partnership ([LLP-1](#)) [for both Domestic and Foreign Limited Liability Partnerships].
- Limited Partnership** - Form to accompany Certificate of Limited Partnership ([LP-1](#)) or Foreign Statement of Limited Partnership ([LP-2](#)).
- Other** - Please explain the type of professional business organization formation and cite the West Virginia Code provision authorizing the same in the spaces provided below.

Type of Professional Business: _____ **W.Va. Code Cite:** _____

***** For Official State Licensing Board Use Only *****

On behalf of _____ Licensing Board, I, _____, hereby verify the eligibility of the business listed hereinabove to engage in the professional services described above, and to form in the State of West Virginia.

Printed Name: _____ Address: _____

Signature: _____ Phone Number: _____ Date: _____