

## Request a Professional Corporation Name Approval

To request a professional corporation name approval, please complete the Certificate of State Board Registration form, which can be downloaded from the Missouri Secretary of State's website at <http://www.sos.mo.gov/forms/corp/corp76.pdf>.

The completed form along with a check or money order in the amount of **\$15.00** made payable to the Missouri Dental Board can be mailed to:

Missouri Dental Board  
3605 Missouri Boulevard  
Jefferson City, Missouri 65109

Please also include the name and address of where the completed form should be mailed back to.

*Please note that pursuant to 20 CSR 2110-2.150(2), the Board adopts the following requirements for the naming of a dental practice:*

- (A) Designations must be under the name(s) of one (1) or more of the dentist(s) practicing in such practice; and*
- (B) Name must contain a dental indicator, such as D.D.S. or D.M.D.*