TO MAKE A CHANGE IN CURRENT LIMITED LIABILITY COMPANY
(MEMBERSHIP/INTEREST)

Please return completed documents to:

Janice Smith
OLCC
PO BOX 22297
MILWAUKIE, OR 97269-2297

DATE OF REQUEST: _____TYPE OF LICENSE: _____

NAME OF LICENSEE: _____

CONTACT PERSON: _____

TRADENAME: _____

BUSINESS LOCATION: _____
(Address) (City) (Zip)

PHONE :( )_____

E-MAIL:_____

Please submit the items below: - **ITEMS IN BOLD ARE OLCC FORMS**

1. **LIMITED LIABILITY COMPANY QUESTIONNAIRE**

2. **INDIVIDUAL HISTORY FORM FOR NEW MEMBER(S)**

3. **STATEMENT OF FUNDING FOR NEW MEMBER(S)**

4. COPY OF NEW MEMBERSHIP AGREEMENT, SIGNED AND DATED
(if you do not have a written membership agreement, please include a written summary of your membership agreement)

5. A WRITTEN SIGNED STATEMENT FROM ANY MEMBER DROPPING FROM LLC

DO NOT CONSIDER YOUR REQUEST APPROVED UNTIL YOU RECEIVE WRITTEN APPROVAL FROM OLCC STAFF.