Minnesota Board of Chiropractic Examiners
Professional Firm Initial Application

Rev. 01/2015

Tennessen Warning

You are being asked to supply private or confidential data as part of an application for issuing or renewing either a license or registration. The purpose and intended use of this information is to enable the Board to determine whether you meet statutory and rule requirements for license or registration issuance or renewal. You are not required to provide this information. However, your failure to do so may impede your ability to receive or renew a license or registration. This data is classified as confidential during the pendency of the application but may then, with the exception of Social Security Numbers, become public following issuance or renewal of the license or registration. Board staff, Board designee's, and staff of the Attorney General's office may have access to this data, as required for review of this application. Questions and answers requiring previous licensure or conduct are maintained as confidential, and will become private once the license or registration is issued or renewed. You have the right to consult with legal counsel before providing any information to the Board.

Information About this Application

Pursuant to Minnesota Statute 319B.11 Subd.3, no professional firm may furnish professional services within Minnesota until the firm files the required documents and filing fee. Licensed chiropractors must complete the enclosed application thoroughly and return it to this office by mail or in person along with:

1. Organizational Documentments (Articles of Incorporation) which you received through the office of the Minnesota Secretary of State (SOS)
    a. Articles must contain an election to operate under MN Statute 319B
    b. The business' name ending must comply with MN Statute 319B
    c. If items (a) or (b) are not correct, an amendment must be filed with the SOS and proof of this amendment submitted to the MBCE
2. Proof of Registration with the SOS (usually stamped Articles or a Certificate of Incorporation)
3. A filing fee of $100 (pursuant to M.S. 319B.11 Subd. 3) payable to the "MBCE"

When all materials are received, we will issue your professional firm certificate. If any portion of this application is not completed, the application will not be processed, but will be returned to the sender for completion. Only forms containing original signatures will be processed. Faxed copies are not acceptable.

All professional firm certificates for Doctors of Chiropractic are subject to an annual renewal fee of $25 (pursuant to M.S. 319B.11 Subd. 4). This is due on or before December 31st of each calendar year.

On the reverse side of this page, for your reference, are sections of M.S. 319B. Please pay close attention to this statute and how it relates to the information being requested on this application. The entire statute may be viewed on our website under "Laws and Rules". If you have any questions, please fee free to contact our office at 651-201-2850.

Sections of Minnesota Statute 319B – for Reference

Although you may have registered with the Secretary of State under 319B or another statue, your Articles of Incorporation registered with the Board may indicate something other than 319B. Ex. 302A or 322B. Articles of Incorporation filed with the MBCE ***must*** *show that you elect to operate under the 319B Professional Firms Act. You may file an amend with the Secretary of State for your articles – and proof of this amendment should then accompany this application.*

319B.02 DEFINITIONS.
Subd. 19. Professional services. "Professional services" means services of the type required or permitted to be furnished by a professional under a license, registration, or certificate issued by the state of Minnesota to practice medicine and surgery under sections 147.01 to 147.22, as a physician assistant pursuant to sections 147A.01 to 147A.27, **chiropractic under sections 148.01 to 148.105**, registered nursing under sections 148.171 to 148.285, optometry under sections 148.52 to 148.62, psychology under sections 148.88 to 148.98, dentistry and dental hygiene under sections 150A.01 to 150A.12, pharmacy under sections 151.01 to 151.40, podiatric medicine under sections 153.01 to 153.25, veterinary medicine under sections 156.001 to 156.14, architecture, engineering, surveying, landscape architecture, geoscience, and certified interior design under sections 326.02 to 326.15, accountancy under sections 326.17 to 326.229, or law under sections 481.01 to 481.17, or under a license or certificate issued by another
state under similar laws. Professional services includes services of the type required to be furnished by a professional pursuant to a license or other authority to practice law under the laws of a foreign nation.

319B.03 AUTHORITY OF MINNESOTA FIRMS TO FURNISH PROFESSIONAL SERVICES; ELECTION BY MINNESOTA FIRMS TO INVOKE THE ACT.
Subd. 2. Election to invoke this act. To elect to become a Minnesota professional firm and be authorized to furnish professional services according to **sections 319B.01 to 319B.12, a Minnesota firm must in its organizational document:**

(1) state that the Minnesota firm elects to operate under those sections;
(2) acknowledge that the Minnesota firm is subject to those sections; and
(3) specify from the list stated in section 319B.02, subdivision 19, the category or categories of professional services the Minnesota firm is authorized to provide.

The statement, acknowledgment, and specification may be made when a Minnesota firm initially files the organizational document or may be added at a later time by updating that document.

> ***This is a SAMPLE of what your amendment should state:***
> *This Corporation (a) hereby elects to operate under and be governed by Minn. Statute 319B.01 to 319B.12 and (b) acknowledges that it is subject to such sections and is authorized to provide chiropractic services under Minn. Statute 148.01 to 148.105.*

319B.05 FIRM NAME.
Subd. 2. Required name endings. The name of a professional firm must end:

(1) in the case of a corporation, with any one of the following phrases, words, or abbreviations: "Professional Corporation"; "Professional Service Corporation"; "Service Corporation"; "Professional Association"; "Chartered"; "Limited"; "P.C."; "P.S.C."; "S.C."; "P.A."; or "Ltd.";
(2) in the case of a limited liability company, with any one of the following phrases or abbreviations: "Professional Limited Liability Company"; "Limited Liability Company"; "P.L.L.C."; "P.L.C."; or "L.L.C."; or
(3) in the case of a limited liability partnership, with any one of the following phrases or abbreviations: "Professional Limited Liability Partnership"; "Limited Liability Partnership"; "P.L.L.P."; or "L.L.P."

A permitted abbreviation may include or omit periods.

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All boxes must be answered or marked as "not applicable." Unanswered questions will result in the application being returned to you and will delay processing.

Step 1: Individual Registering this Professional Firm

Last Name	First Name	Middle (full) Name	Suffix
Other / Alias / Maiden Name			
Address Line 1			
Address Line 2			
City	State / Province	Zip Code	
County	Country		
Home Phone	Work Phone	Cell Phone	
Fax	Email	MN DC License Number	

Step 2: Name and Address of the Professional Firm

(Name ending must comply with 319B.05, subd 2 which is shown on page 2 for reference)

Name:_____

Address:_____

Step 3: Ownership

List names and license* information of all owners as described in 319B.02, Subd 19 (shown on page 2 for reference):
*(Note: If you have more than one license, please list each separately)

Last Name	First Name	License Type	License #	License Status	Expiration Date	% of shares

Step 4: Notarized Affidavit

The following statement must be signed by the applicant (as named in step one) in front of a Notary Public:

I hereby affirm that I am an owner of the professional firm, who is licensed to practice Chiropractic in the State of Minnesota. I hereby affirm that the foregoing statements are true and correct to the best of my knowledge. I also affirm that all shareholders, directors, officers, employees and agents rendering professional services in this state on behalf of the corporation are licensed by this state or otherwise authorized to render such professional service.

_____ _____

Applicant's Signature Date

Subscribed and sworn to before me,

this _____day of _____, _____ (NOTARY SEAL)

_____

Signature of Notary

Step 5: Organization Documents and Fee

Please include the following items with the submittal of this application:

a. Organizational documents (articles of incorporation/organization); which must include an election to operate under Statute 319B and name ending must comply with 319B
b. Proof of registration with the MN Secretary of State (stamped articles or certificate)
c. Amendments to item (a) or (b) ***if needed*** to comply with 319B
d. Filing fee of $100 made out to the Minnesota Board of Chiropractic Examiners

Mail all materials to:
Minnesota Board of Chiropractic Examiners
2829 University Ave SE, Suite 300
Minneapolis, MN 55414-3220

MBCE OFFICE USE ONLY

Form Related Information	**Received Stamp**	**Payment Information**		
Incomplete Form Returned To Licensee		**Check Number**		
		Fee	**OET N/A**	**Late Fee N/A**
Date Re-Received Form		**Misc. Fee**		
		Date Paid (if different)		**Initials**

_____ _____

Signature of Executive Director **Date of Approval**

Effective Date	Certificate Mailed