BOARD OF ARCHITECTURE ▪ ENGINEERING
LAND SURVEYING ▪ LANDSCAPE ARCHITECTURE
GEOSCIENCE ▪ INTERIOR DESIGN
85 East 7th Place, Suite 160, St. Paul, MN 55101-2113
Phone: (651) 296-2388 • Email: aelslagid@state.mn.us • Web: mn.gov/aelslagid

PROFESSIONAL FIRM REGISTRATION RENEWAL INSTRUCTIONS

For renewals only. For **initial** professional firm registration, see Professional Firm Registration Application.

Minnesota Statutes 319B.11.4 requires that firms registered with the Board as "professional firms" file an annual report and submit a fee by December 31 each year.
All registrations expire December 31, regardless of the initial registration date.

Renewal Steps/Annual Report Requirements:

1. Complete the renewal form and have it signed by an individual who
   - holds a current license/certificate from the Minnesota Board of Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience and Interior Design, **and**
   - is an owner or employee of the professional firm.
2. If you have made changes to your Articles of Incorporation (for Minnesota firms) or Certificate of Authority (for foreign firms), include an updated copy with your renewal. **IMPORTANT:** Include bordered page (signed by the Secretary of State) and also detail page (notes your "Professional Status"/319B election) received as part of your filing with the Minnesota Secretary of State.
3. If you have changes to the list of owners and those with governance authority that you provided to the Board (including address or position/job title changes), submit an updated list. The list should contain 1) legal name 2) address, 3) position/job title, and 4) Minnesota license or certificate number (if applicable). List every owner/governor, not just those with updates.
4. Enclose the **$25.00** registration renewal fee. Make check or money order payable to **MN Board of AELSLAGID.** The Board is unable to accept cash, credit card, or other electronic forms of payment for the renewal fee. **Mail** all items to the address above; renewals received without payment **ENCLOSED** will be returned.

If you have questions, please call the Board office at (651) 296-2388.

NOTICE OF COLLECTION OF PRIVATE DATA

In accordance with the Minnesota Government Data Practices Act (Minnesota Statutes §13.04, Subd. 2), the Board is required to inform you of your rights as they pertain to private data collected from you on this application for firm registration renewal. The data you furnish on the application will be used by the Board to assess your firm's qualifications for registration renewal. You are not legally required to provide this data; however, if you fail to do so, the Board may be unable to approve your application.

Pursuant to Minnesota Statutes §13.41, Subd. 2 (2024), all application data, except name and designated address, are private data until registration is granted. When registration is granted, all data become public record.

The Board will not share your private data with other persons or agencies unless it is required by law.

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FOR BOARD USE ONLY
Renewal Fee $

FOR BOARD USE ONLY
Renewal Processed

PROFESSIONAL FIRM REGISTRATION RENEWAL

Minnesota Statutes 319B.11.4 requires that professional firms file this annual report at the end of each calendar year (by December 31) to renew their registration with the Board.

Renewal Fee: $25
Make check or money order payable to:
MN Board of AELSLAGID

CLEAR FORM PRINT FORM

1. Contact Information

Firm Name _____
(Legal name of entity as registered with the Minnesota Secretary of State)

Street Address _____
(No PO Boxes)

City _____ State/Province _____ ZIP/Postal Code _____ Country (if not US) _____

Email address for renewal notices _____ Phone # _____

Contact Name* _____
(Prefix) (First Name) (Middle Name) (Last Name) (Suffix)

*Person who should receive all correspondence or phone calls from the Board.

2. Any changes to your Articles of Incorporation (MN firms) or Certificate of Authority (Foreign)?

☐ **Yes.** An updated copy of the applicable document is enclosed.
IMPORTANT: Include bordered page (signed by the Secretary of State) and also detail page (notes your "Professional Status"/319B election) received as part of your filing with the Minnesota Secretary of State.

☐ **No**

3. Any changes to your List of Owners/Those with Governance Authority?

☐ **Yes.** An updated list is enclosed of **all** owners/governors.
The list includes their 1) legal name 2) address, 3) position/job title, and 4) Minnesota license or certificate number (if applicable).

☐ **No**

4. Required ▶ Statement

☐ All employees, agents, and independent contractors furnishing professional services within Minnesota on behalf of the firm are either a Minnesota licensee/certificate holder or working under one who is in responsible charge.

5. Signature: I swear or affirm that I have read the foregoing report and that the statements are true and complete. If signing electronically, I agree that my electronic signature shall constitute the execution of this document in exactly the same manner as if I had signed by hand. I have the authority to sign for my firm, and I hold a current license with this Board.

Printed Name of **MN Licensed** Owner or Employee	**REQUIRED ▶** MN License/Certificate #
Signature of **MN Licensed** Owner or Employee	Date