



# The State of North Carolina

The North Carolina Board of Architecture  
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Part I. Application for Certification to Secretary of State      FEE: \$75.00  
USE THIS APPLICATION TO FORM A NEW NORTH CAROLINA PROFESSIONAL CORPORATION

## Information and Instructions for Applying for the Certification to Secretary of State

- Complete and return this form to the Executive Director for the North Carolina Board of Architecture at the above address.
- **Attach to this form one copy of the proposed Articles of Incorporation.**
- The application fee is \$75, the check should be made payable to the North Carolina Board of Architecture .
- Upon receipt of the foregoing, the Executive Director will issue and return to you the Board's Certification which must be sent with your Articles of Incorporation and filed with the North Carolina Secretary of State, Corporations Division, PO Box 29622, Raleigh, North Carolina 27626-0632 (Phone: (919) 807-2225).
- Incomplete applications will be returned.
- Please note that a Part II application will be sent to you along with the Certification.
- **ALL CORRESPONDENCE FROM THE BOARD OF ARCHITCTURE WILL BE SENT VIA E-MAIL.**

I. Proposed name of the corporation: **See Rule .0205 Name of Firm:**

II. Names of all the proposed owners of the shares of stock: (attach separate sheet if necessary) **Non-licensed employees may not own more than one-third of the total issued and outstanding shares of the Corporation. % of shares must total 100.**

Name:	Address:	Profession:	NC Registration/ License Number:	% of Shares Owned:

III. Names of all the proposed directors of the corporation: (attach a separate sheet if necessary)

Name:	Address:	Profession:	State & Registration Number:

IV. Names of the proposed corporate officers: (attach a separate sheet if necessary)

Name:	Address:	Position:	State & Registration Number:

Contact information:

Name \_\_\_\_\_

Street \_\_\_\_\_

City, \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email (PLEASE PRINT CLEARLY—ALL CORRESPONDENCE WILL BE SENT VIA EMAIL.) \_\_\_\_\_

I certify that the information contained in this application is true and correct to the best of my knowledge and belief. Please note that at least one incorporator must be a licensed architect.

Incorporator (Signature) \_\_\_\_\_

Date \_\_\_\_\_

Please note that at least one incorporator must be a licensee of the NC Board of Architecture

Printed Name: \_\_\_\_\_