

**INSTRUCTIONS FOR FILING THE APPLICATION FOR CERTIFICATE OF TITLE
(Firm Registration)**

TO AVOID IMPROPER FILING, PLEASE READ CAREFULLY.

There are six sections on the three page application form.

- Page one: All parts of sections 1 and 2 **MUST** be completed. For the FEI#, you may use the Interior Designer of Record's Social Security # if the Federal Tax ID # is pending and inform the Board in writing when it is established.
- Section 1: The **LEGAL** name of the entity should be the same as the name on the original certificate of title. If it is different, please explain. The Secretary of State has declared that numbers 0-10 numeric or written are non-descriptive and may not be used in the entity title. The address and telephone number should be the address and telephone number of the office.
- Section 2: The name(s) of the interior designer of record for the entity and his or her Oklahoma interior designer registration number(s) should be listed here. Check the **legal position** in the entity of the interior designer of record
- Page two: All parts of this page **MUST** be completed. The interior designer of record's signature(s) is required and if there are any other partners, directors, officers, shareholders, managers, members or principals in the firm, at least one of them must sign the Attest portion of this page. The signature and seal of a notary is also required. If you have more than one "Interior Designer of Record", an additional copy of page two must be completed, signed and notarized for each "Interior Designer of Record".
- Page three: Sections 3 through 4 must be completed if they apply to your firm. Write N/A in the sections that do not apply.
- Section 5: List the main office (office on original certificate of title) and all branch offices of the firm. An office that is not involved in interior design practice in Oklahoma should be listed with the statement "Does not practice in Oklahoma."
- Nothing is required for section six.

Send the completed Certificate of Title application and a check for the application fee in the amount of \$350.00 Check payable to "Oklahoma Board of Architects".

*IMPORTANT: If your firm is a corporation, limited partnership, LLC OR LLP, please read the special instructions on page 2 of the instructions.

Your application will be acted on by the Board at the next regular meeting and the Board will mail a certificate for the Certificate of Title to your business address when it is approved.

The law requires the "Interior Designer of Record" to notify the Board in writing, within thirty (30) days, of all changes to the original application. The certificate of title (firm registration) will begin on date approved by the Board and expire on June 30, 2009. Renewals will be sent to the "Interior Designer(s) of Record" at the business address.

**SPECIAL INSTRUCTIONS FOR CORPORATIONS,
LIMITED PARTNERSHIPS, LLC AND LLP**

* Contact the Oklahoma Secretary of State, State Capitol, Oklahoma City, Oklahoma 73105 or call 405-521-3911 for all forms to domesticate or qualify your entity for Oklahoma.

* Complete all forms received from the Secretary of State.

Upon approval by the Board, corporation, limited partnerships, LLC and LLP shall file all original domestication or certificate of qualification, fees and the Board letter of approval with the Oklahoma Secretary of State.

Consult the State Architectural and Interior Designer Act, Section 46.9 (H) for interior designers and the Oklahoma Administrative Code 55:10 Subchapter thirteen (13) Organizational Practice for further information or contact the Board office.

BOARD OF GOVERNORS OF THE LICENSED ARCHITECTS
LANDSCAPE ARCHITECTS AND INTERIOR DESIGNERS OF OKLAHOMA
P O Box 53430
Oklahoma City, Oklahoma 73152
405-949-2383 Fax 405-949-1690

APPLICATION FOR CERTIFICATE OF TITLE

Refer to the Oklahoma Administrative Code 55:10 Subchapter 13
(All information must be typewritten)

CT NUMBER _____
(Leave Blank)

GENERAL INFORMATION

Legal Name of Entity: _____
(Exactly as you want it filed with the Secretary of State)

Business Address: _____

City _____ State _____ Zip _____

Business Phone Number: _____ (Include Area Code)

Business Fax Number: _____ (Include Area Code)

No. of offices: _____ **Federal Tax ID #** _____

Type Of Entity: (Carefully consider how your company is *legally* set up before selecting from the following.)

- _____ LLC, LLP, PLLC, PLLP: Manager or Member
- _____ Partnership: Partner
- _____ Limited Partnership: General Partner
- _____ Corporation, Sole Proprietorship: Director, Officer, Shareholder, Principal
- _____ Association: Corporation, LLC, LLP, Individuals
- _____ Joint Venture: Two of the above

Check the Legal position in the entity of the interior designer of record

2. NAME _____ OK Registration No. _____

General Partner _____ Director _____ Sole Proprietor _____
Partner _____ Officer _____ Shareholder _____ Manager _____
Member _____ Principal _____

NAME _____ OK Registration No. _____

General Partner _____ Director _____ Partner _____ Officer _____
Shareholder _____ Manager _____ Member _____ Principal _____

NAME _____ OK Registration No. _____

General Partner _____ Director _____ Partner _____ Officer _____
Shareholder _____ Manager _____ Member _____ Principal _____

(add additional page if more space is needed)

PLEASE COPY THIS PAGE FOR EACH INTERIOR DESIGNER OF RECORD

AFFIDAVIT:

I, being duly sworn, state that I am a registered interior designer in the State of Oklahoma, in good standing with the Board of Governors of the Licensed Architects, Landscape Architects and Interior Designers of Oklahoma and that I consent to be responsible for all of the activities and decisions in the State of Oklahoma for the above named entity as same relates to the practice of interior design in this state on a _____ full or _____ part time basis. The normal office hours of the firm are _____ am to _____ pm and open _____ through _____ (days of the week).

I understand that all work is under my direct supervision and responsible control. Further, I hereby certify I have received, read and understand the State Architectural and Interior Designers Act and the Board's current Rules and Regulations as it applies to the requirements and responsibilities of and for this entity concerning the Certificate of Title.

I hereby certify _____, acting on behalf of the entity by filing this application is doing so with full legal authority to act in the entity's behalf as the Interior Designer of Record.

IN WITNESS WHEREOF, the entity has caused its name to be hereunto

Affixed by _____ and
(signature of interior designer of record)

Attested this _____ day of _____, 20____.

ATTEST:

(Attesting Signature) (Type name of attesting signature)

(Attesting Signature) (Type name of attesting signature)

Subscribed and sworn to before me this _____ day of _____, 200_

(Signature of Notary Public)

My commission expires _____.

3. NAMES IN FIRM TITLE

List below ALL names in firm title, their license or registration number, type of license or registration, state of license or registration, indicate status (active, inactive, retired or deceased) and the year if inactive, retired or deceased. State N/A if not applicable.

4. PARTNERS/DIRECTORS/OFFICERS/MEMBERS/MANAGERS/PRINCIPLES
OR OTHER EMPLOYEES:

List below the name, title and address of ALL personnel which act in its behalf IN OKLAHOMA as architects, landscape architects or interior designers in the capacity as partners, directors, officers, members, managers, principals or employees of the entity. Indicate ALL titles of persons, the type of Oklahoma license or registration held and the license or registration number.

5. LIST ALL OFFICES OF THE FIRM BELOW:

List office addresses. If none state N/A.

6. DISCLAIMER

The Board of Governors of the Licensed Architects, Landscape Architects and Interior Designers Oklahoma, by approving and issuing a Certificate of Title to an entity, disclaims that an entity is lawfully or legally formed under the statutes of the State of Oklahoma.