

# Minnesota Board of Accountancy

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## **CPA Firm Name Change Request Instructions**

- All firm name changes must be approved by the Board before implementation.
- Along with the attached form, please submit to the Board the following:
  - a copy of the Articles of Incorporation or Certificate of Authority from the Minnesota Secretary of State showing the name change; **and**
  - a proposed copy of the firm's letterhead showing the name change.
- In addition, if the legal form of the firm is changing you will be required to submit a new firm permit application.

## CPA Firm Name Change Request

(Changes are effective after Board approval)

1. State the current name of the firm (prior to any name changes):

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2. State the current Firm Permit number of the firm:

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3. State the address of the principal place of business:

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|  |  |  |  |
|--|--|--|--|

Street

City

State

Zip code

4. State the legal form of the firm prior to the name change:

- |  |  |
|--|--|
| <input type="checkbox"/> CPA Corporation                   | <input type="checkbox"/> CPA Partnership                       |
| <input type="checkbox"/> CPA Limited Liability Company     | <input type="checkbox"/> Foreign Firm- Practicing in Minnesota |
| <input type="checkbox"/> CPA Limited Liability Partnership | <input type="checkbox"/> Sole Proprietorship                   |

5. State the proposed new name of the firm:

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6. Is the legal form of the firm changing?  No  Yes\*

*\*If the legal form of your firm is changing, please contact the Board office before proceeding as you will need to apply for a new firm permit.*

7. List the names and complete street addresses of all partners, officers, shareholders, members, or managers whose principal place of business is in this state and who are conducting business under the above name. Attach additional sheet(s) if necessary.

| Name<br>(please print) | Street address | City | State | Zip |
|------------------------|----------------|------|-------|-----|
|------------------------|----------------|------|-------|-----|

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8. Explain in detail the reason for the change. Attach additional sheet(s) if necessary.

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|                      |   |
| Date                 | Signature (ONLY one person listed in #7 is required to sign.) |
|                      |   |
| Print Name and Title |   |