

85 7th Place East, Suite 500
St. Paul, Minnesota 55101-3165
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651.296.4026 FAX 651.297.1959
An equal opportunity employer

October 27, 2009

DANIEL B STARR DO IT BEST CORP 6502 NELSON ROAD PO BOX 868 FORT WAYNE, IN 46801-0868

Re: F-290

DO IT BEST CORP

DO IT BEST CORP. MEMBERSHIP AGREEMENT

Dear Mr. Starr:

The Annual Report has been reviewed and is in compliance with Minnesota Statute Chapter 80C and Minnesota Rules Chapter 2860.

This means that there continues to be an effective registration statement on file and that the franchisor may offer and sell the above-referenced franchise in Minnesota.

The franchisor is not required to escrow franchise fees, post a Franchise Surety Bond or defer receipt of franchise fees during this registration period.

As a reminder, the next annual report is due within 120 days after the franchisor's fiscal year end, which is June 30, 2010.

Sincerely,

GLENN WILSON Commissioner

By:

Daniel Sexton Commerce Analyst Supervisor Registration Division (651) 296-4520

GW:DES:dlw



STATE OF MINNESOTA DEPARTMENT OF COMMERCE REGISTRATION DIVISION (651) 296-4520

IN THE MATTER OF THE REGISTRATION OF:
DO IT BEST CORP. MEMBERSHIP AGREEMENT
By DO IT BEST CORP

ORDER AMENDING REGISTRATION

WHEREAS, an application to amend the registration and amendment fee have been filed,

IT IS HEREBY ORDERED that the registration dated March 23, 1977, is amended as of the date set forth below.

GLENN WILSON

Commissioner

Department of Commerce 85 7th Place East, Suite 500

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Alenn Wilson

St Paul, MN 55101

Date: October 27, 2009



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UNIFORM FRANCHISE REGISTRATION APPLICATION

F-290 File No.

(Insert file number of immediately preceding filing of Applicant)

| State: | Minnesota Fee: \$300 |
|----------|---|
| APPL | ICATION FOR (Check only one): |
| | INITIAL REGISTRATION OF AN OFFER AND SALE OF FRANCHISES |
| <u>X</u> | RENEWAL APPLICATION OR ANNUAL REPORT |
| | PRE-EFFECTIVE AMENDMENT |
| | POST-EFFECTIVE MATERIAL AMENDMENT |
| 1. | Full legal name of Franchisor: |
| | Do it Best Corp. |
| 2. | Name of the franchise offering: |
| | Do it Best Corp. |
| 3. | Franchisor's principal business address: |
| | 6502 Nelson Road Post Office Box 868 Fort Wayne, IN 46801-0868 |
| 4. | Name and address of Franchisor's agent in this State authorized to receive service of process: |
| | Commissioner of Commerce Minnesota Department of Commerce 85 - 7 th Place East, Suite 500 St. Paul, MN 55101 |
| 5. | The states in which this application is or will be shortly on file: $\sqrt{>}$ |
| | No additional states. |

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