

STATE OF MINNESOTA DEPARTMENT OF COMMERCE REGISTRATION DIVISION (651) 539-1631

IN THE MATTER OF THE REGISTRATION OF: FOCUSED TAX SOLUTIONS F/A
By FTS HOLDINGS, LLC

ORDER OF REGISTRATION

WHEREAS, an application has been filed pursuant to Minn. Stat. §80C.04; and

WHEREAS, the applicant has complied with the requirements of registration,

NOW, THEREFORE, IT IS ORDERED, that the registration be declared effective as of the date set forth below.

MIKE ROTHMAN

Commissioner

Department of Commerce 85 7th Place East, Suite 500

St Paul, MN 55101

Date: September 26, 2017

dlw



Form A - Uniform Franchise Registration Application

7-8294 FRANCISCOM

D. CABBADACOM

UNIFORM FRANCHISE REGISTRATION APPLICATION

File Number:

State of Minnesota **Dept of Commerce**

State: Minnesota

Fee: \$400

APPLICATION FOR (Check only one):

(X)	INITIAL REGISTRATION OF AN OFFER AND SALE OF FRANCHISES
· ·	RENEWAL APPLICATION OR ANNUAL REPORT
	PRE-EFFECTIVE AMENDMENT
	POST-EFFECTIVE AMENDMENT
1.	Full legal name of Franchisor:
	FTS Holdings, LLC
2.	Name of the franchise offering: Focused Tax Solutions
	01

3. Franchisor's principal business address:

> FTS Holdings, LLC 405 North Calhoun Road, Suite 106 Brookfield, Wisconsin 53005

- Name and address of Franchisor's agent in the State of Minnesota authorized to 4. receive service of process: Minnesota Commissioner of Commerce 85 7th Place East, Suite 500 Saint Paul, Minnesota 55101
- The states in which this application is or will be shortly on file: Minnesota
- 6. Name, address, telephone and facsimile numbers, and e-mail address of person to whom communications regarding this application should be directed:

Geoffrey C. Gaughan, Counsel McGrow Consulting 30 North Street Hingham, MA 02043 ggaughan@mcgrow.com

Telephone (781) 740-2211

Facsimile (781) 740-2287

FYE 12/31/17 Eff 09/26/17



Certification

I certify and swear under penalty of law that I have read and know the contents of this application, including the Franchise Disclosure Document with an Issuance Date of April 25, 2017, attached as an exhibit, and that all material facts stated in all those documents are accurate and those documents do not contain any material omissions. I further certify that I am duly authorized to make this certification on behalf of the Franchisor and that I do so upon my personal knowledge.

that I am duly authorized to make this certification on behalf of the Franchisor and that I
do so upon my personal knowledge.
Signed at BrookField, WT, June 8, 20/7 [CITY/STATE] [MONTH/DAY]
By: Name: Robert Zyzo
Title: President
STATE OF Wisconsin)
STATE OF Wistonsin) COUNTY OF Wanksha) ss:
Personally appeared before me this
Dolin a. Schol
Notary Public Notary Public My Commission Expires: 15 Por manest

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