COMMERCE DEPARTMENT



Securities Division

File Number: F-8072 Franchisor: Fortune Practice Management, Inc. Franchise Name: **Fortune Management**

ORDER OF WITHDRAWAL

WHEREAS, there has been no activity with respect to the above captioned application for Registration (the "application") for a period of 120 days;

WHEREAS, the application has not become effective:

THEREFORE, IT IS ORDERED, pursuant to Minn. Stat. Sec 80C.05, Subd. 4 (1994) that the Application be, and hereby withdrawn as of the date set forth below.

DATED:

10/18/2017

Mike Kothiman

MIKE ROTHMAN COMMISSIONER **Minnesota Department of Commerce** 85 7th Place East, Suite 280 Saint Paul, MN 55101

85 7th Place East - Suite 280 - Saint Paul, MN 55101 | P: 651-539-1500 | F: 651-539-1547



Thompson, Carolyn (COMM)

To: Subject: colley@colleylaw.com FW: Franchise Renewal-F-8072 Fortune Practice Management, Inc.

Mr. Colley,

We are in receipt of the Annual Report for the above-referenced franchise registration. We found the following discrepancies:

FEES

We are in receipt of the Annual Report for the above-referenced franchise registration. In reviewing the redlined changes that were submitted, we find that they are material to the offering as defined in 2860.2400 of the Rules for MN Statutes, Chapter §80C. Therefore, an Amendment fee of \$100.00 must be submitted in addition to the Annual Report fee. Please mail a check in the amount of \$100.00 as well as this email to the MN Department of Commerce:

Attn: Carolyn Thompson – Franchise Registration Minnesota Department of Commerce Enforcement Division – Securities Registration Specialist 85 7th Place East, Suite 280, Saint Paul, MN 55101 P: 651-539-1627 Carolyn.Thompson@state.mn.us

If you have any questions, please do not nesitate to contact me.



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UNIFORM FRANCHISE REGISTRATION APPLICATION

(Insert file number of previous filings of Applicant) 8072 Fee: \$200 (Enclosed when application is initially filed) State of Minnesota Dept of Commerce

APPLICATION FOR (Check only one):

 REGISTRATION OF	AN OFFER AND S.	ALE OF FRANCHISES	
 REGISTRATION REN	NEWAL STATEME	NT OR ANNUAL REPOI	RT
AMENDM	IENT NUMBER	TO APPLICATION	[
POST-EFFECTIVE FILED UNDER SECTION			
 PRE-EFFECTED	DATED	· ·	-

use of our website or this document

es and/or damages in connection with the

1. Name of Franchisor. (If applicant is subfranchisor, the name of subfranchisor.)

Fortune Practice Management, Inc.

Name under which the Franchisor is doing or intends to do business.

Fortune Management

2. Franchisor's principal business address.

1265 El Camino Real, Suite 205 Santa Clara, CA 95050

Name and address of Franchisor's agent in the State of Minnesota authorized to receive process.

Commissioner of Securities 85 Seventh Place East, Suite 500 Saint Paul, MN 55101

3. Name, address and telephone number of subfranchisors, if any, for this state.

NONE

4. Name, address and telephone number of person to whom communications regarding this application should be directed.

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STEPHEN A. COLLEY STEPHEN A. COLLEY, APC 11682 EL CAMINO REAL, SUITE 100 SAN DIEGO, CA 92130 (858) 259-0888

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