



MINNESOTA
DEPARTMENT OF
COMMERCE



85 7th Place East, Suite 500
St. Paul, Minnesota 55101-2198
www.commerce.state.mn.us
651.296.4026 FAX 661.297.1959
An equal opportunity employer

April 22, 2011

SHERRY CAMPBELL
FURNITURE MEDIC LP
3839 FOREST HILL IRENE ROAD
MEMPHIS, TN 38125

Re: F-2724
FURNITURE MEDIC LP
FURNITURE MEDIC

Dear Ms. Campbell:

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 December 31, 2011.

Sincerely,

MIKE ROTHMAN
Commissioner

By:

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

MR:DES:dlw

F-2724

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

IN THE MATTER OF THE REGISTRATION OF:
FURNITURE MEDIC

By FURNITURE MEDIC LP

ORDER AMENDING
REGISTRATION

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

IT IS HEREBY ORDERED that the registration dated
April 2, 1993, is amended as of the date set forth below.



MIKE ROTHMAN
Commissioner
Department of Commerce
85 7th Place East, Suite 500
St Paul, MN 55101

Date: April 22, 2011

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State of Minnesota
Dept. of Commerce
APR 01 2011
Rec'd \$200

UNIFORM FRANCHISE REGISTRATION APPLICATION

File No. F-2724

State: MINNESOTA

Fee: \$200

APPLICATION FOR (Check only one):

- INITIAL REGISTRATION OF AN OFFER AND SALE OF FRANCHISES
- RENEWAL APPLICATION OR ANNUAL REPORT
- PRE-EFFECTIVE AMENDMENT
- POST-EFFECTIVE MATERIAL AMENDMENT

~~11-22-11~~
~~11-24-11~~
4-21-11
+100.00

1. Full legal name of Franchisor: Fumiture Medic Limited Partnership
2. Name of the franchise offering: Fumiture Medic®
3. Franchisor's principal business address: 3839 Forest Hill-Irene Road
Memphis, Tennessee 38125
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 7th Place East, Suite 500
St. Paul, Minnesota 55101-2198
5. The states in which this application is or will be shortly on file:
California, Hawaii, Illinois, Indiana, Maryland, Minnesota, North Dakota, New York,
Rhode Island, South Dakota, Virginia, Washington, and Wisconsin
6. Name, address, telephone and facsimile numbers, and e-mail address of person to whom communications regarding this application should be directed:

Sherry Campbell Telephone: (901) 597-7962
 Funimre Medic Limited Partnership Fax: (901) 597-9725
 3839 Forest Hill-Irene Road scampbell@smclean.com
 Memphis, Tennessee 38125

4-22-11
A/K/A Ann

~~4-22-11~~
~~Ann~~

12/15/11 4-2-11

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