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CERTIFIED SPECIALIST, FRANCHISE AND DISTRIBUTION LAW
THE STATE BAR OF CALIFORNIA
BOARD OF LEGAL SPECIALIZATION

May 17, 2019

VIA E-FILING

Franchise Examiner
Department of Financial Institutions
Division of Securities
345 West Washington Avenue, 4th Floor
Madison, Wisconsin 53703-2701

Dear Sir or Madam:

On behalf of our client, **Reins USA Franchise Company, Inc.**, doing business as "Gyu-Kaku", ("Applicant"), to register Applicant's franchise in Wisconsin, enclosed are the following:

1. Uniform Franchise Registration Renewal Application and notarized Certification (Form A).
2. One complete copy of Applicant's franchise disclosure document ("FDD") and application documents in Adobe PDF Format.
3. Uniform Franchise Consent to Service of Process (Form C).
4. Consent letter of auditor to inclusion of Applicant's audited financial statement for 2018 is included as Exhibit B to the FDD.

The state filing fee in the amount of \$400.00 has been paid by credit card.

Please review these enclosures at your earliest convenience and notify us of any comments or questions. We acknowledge that Applicant's registration is granted upon receipt of application and will expire one year after registration.

Very truly yours,


DON M. DRYSDALE

Enclosures

FORM A – Uniform Franchise Registration Application**UNIFORM FRANCHISE REGISTRATION APPLICATION**

File No. _____
(Insert file number of immediately
preceding filing of Applicant)

Fee: **\$400.00** _____

State: Wisconsin

Date: May 16, 2019

APPLICATION FOR (Check only one):

X INITIAL REGISTRATION OF AN OFFER OR SALE OF FRANCHISES

_____ RENEWAL APPLICATION OR ANNUAL REPORT

_____ AMENDMENT NUMBER _____ TO APPLICATION
PRE-EFFECTIVE AMENDMENT

_____ AMENDMENT NUMBER _____ TO APPLICATION
POST-EFFECTIVE MATERIAL AMENDMENT

1. Full legal name of Franchisor:

Reins USA Franchise Company, Inc.

2. Name of the franchise offering:

“Gyu-Kaku”

3. Franchisor's principal business address:

20000 Mariner Avenue, Suite 500, Torrance, California 90503

4. Name and address of Franchisor's agent in this State authorized to receive service of process:

Administrator, Wisconsin Commissioner of Securities, 201 West Washington Avenue,
Suite 300, Madison, Wisconsin 53703-2640.

5. The states in which this application is or will be shortly on file:

California, Hawaii, Indiana, Illinois, Maryland, Michigan, Minnesota, New York, Virginia,
Washington and Wisconsin

FORM A (cont'd) – Uniform Franchise Registration Application

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6. Name, address, telephone and facsimile numbers, and e-mail address of person to whom communications regarding this application should be directed:

Don M. Drysdale; Lee, Hong, Degerman, Kang & Waimey; 3501 Jamboree Road, Suite 6000, Newport Beach, California 92660-2960, telephone (949) 419-8730 and facsimile (949) 856-3245; E-mail: ddrysdale@lhlaw.com

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 February 13, 2019, 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.

Signed at Torrance, California, on ^{May} ~~April~~ ^{16th}, 2019.

FRANCHISOR:

REINS USA FRANCHISE COMPANY, INC.By: Name: Akitsugu YamaguchiTitle: Chief Operating Officer

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

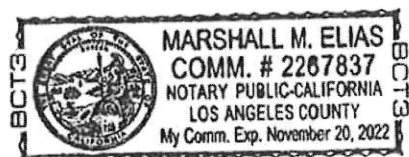
STATE OF CALIFORNIA

COUNTY OF LOS ANGELES

On ^{May} ~~April~~ ^{16th}, 2019, before me, Marshall M. Elias, Notary Public, personally appeared Akitsugu Yamaguchi, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature 

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