

Form A – Uniform Franchise Registration Application

UNIFORM FRANCHISE REGISTRATION APPLICATIONFile No. F-5659
(Insert file number of immediately
preceding filing of Applicant)State: MinnesotaFee: \$300

APPLICATION FOR (Check only one):

 INITIAL REGISTRATION OF AN OFFER AND SALE OF FRANCHISES REGISTRATION RENEWAL STATEMENT OR ANNUAL REPORT PRE-EFFECTIVE AMENDMENT POST-EFFECTIVE MATERIAL AMENDMENT**1. Full legal name of Franchisor:**

Mr. Sandless Franchise LLC

2. Name of the franchise offering:

Mr. Sandless, Dr. DecknFence

3. Franchisor's principal business address:

2970 Concord Road, Aston, PA 19014

4. Name and address of Franchisor's agent in this State authorized to receive service of process:Minnesota Commissioner of Commerce
85 7th Place East, Suite 500
St. Paul, MN 55101**5. The states in which this application is or will be shortly on file:**

CA, HI, IL, IN, MD, MN, NY, ND, RI, SD, VA, WA, WI

6. Name, address, telephone and facsimile numbers, and e-mail address of person to whom communications regarding this application should be directed:MaryLou Fuelling, Harold L. Kestenbaum, PC; 90 Merrick Ave., Suite 601, East Meadow, NY
11554; Telephone: (516) 745-0099, Facsimile: (516) 745-0293, E-mail: mfuelling@hlkpc.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 4-7-2016 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 ASTON PA, 4/12, 2016
(City and State) (Date)

Franchisor:

MR. SANDLESS FRANCHISE LLC

By: [Signature]

Name: DANIEL J. PRASALOWICZ

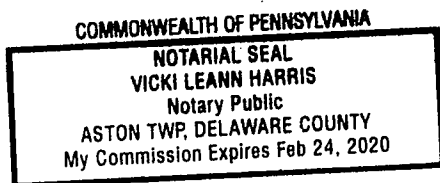
Title: CEO

STATE OF Pennsylvania
COUNTY OF Delaware) ss:

Personally appeared before me this 12 day of April, 2016 the above-named Daniel Prasalowicz to me known to be the person who executed the foregoing application (as CE of the above-named applicant) and, being first duly sworn, stated upon oath that said application and all exhibits submitted herewith, are true and correct.

(NOTARY'S SEAL)

[Signature]
(Notary)



Form B – Franchisor’s Costs and Sources of Funds
FRANCHISOR’S COSTS AND SOURCE OF FUNDS

1. Disclose the Franchisor’s total costs for performing its pre-opening obligations to provide goods or services in connection with establishing each franchised business, including real estate, improvements, equipment, inventory, training and other items state in the offering:

Category	Costs
Real Estate	\$0
Improvements	\$0
Equipment	\$0
Inventory	\$940
Training	\$879
Other (describe)	
<u>Lodging</u>	\$500
<u>Vehicle</u>	\$150
_____	_____
Totals	\$2,469

2. State separately the sources of all required funds:

These sums will be derived primarily from working capital and partially from the initial franchise fee.

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