

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

IN THE MATTER OF THE REGISTRATION OF:
APTASK F/A
By APTASK WORKFORCE, 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.

JESSICA LOOMAN

Commissioner

Department of Commerce 85 7th Place East, Suite 280 St Paul, MN 55101

Date: December 12, 2017 dlw



UNIFORM FRANCHISE REGISTRATION APPLICATION

File No. (Insert file number of immediately preceding filing of Applicant) State of Minnesota Dept of Commerce 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 MATERIAL AMENDMENT 1. Full legal name of Franchisor: FinTech Consulting LLC 2. Name of the franchise offering: ApTask Workforce LLC. Franchisor's principal business address: Our principal business address is 379 3. Thornall St, 6th Floor, Edison, NJ 08837 4. Name and address of Franchisor's agent in this State authorized to receive service of process: Delaware 5. The states in which this application is or will be shortly on file: CA, WA, RI, IL, IN, VA, MD, MN, NY, WI

whom communications regarding this application should be directed: Kari Denton <u>kari@totalfranchiseops.com</u>, 732-768-2305 32 Timothy Lane Tinton Falls, NJ 07724

6.

Eff 12/12/17 FVE 12/31/17

Name, address, telephone and facsimile numbers, and e-mail address of person to



CERTIFICATION

I certify 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 <u>July 6, 2017</u> 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 New Jersey (Middlesex County), this 6th day of July, 2017

Franchisor:

ApTask Workforce LLC.

By: ____

Name: <u>Tajuddin Haslani</u>

Title: Managing Member

STATE OF NEW JERSEY

COUNTY OF MADLE SEX

On this $\underline{6^{th}}$ day of \underline{July} , 2017, personally appeared $\underline{Taj \; Haslani}$ and known to me as the $\underline{Franchisor / Managing \; Member}$ of the above-named entity, and as such officer, being authorized to do so, executed the foregoing instrument.

Notary Public

r KAPLANA PATEL

(SEAA)Notary Public of New Jersey My Commission Expires April 24, 2019

ID No. 2384946

This is a document preview downloaded from FranchisePanda.com. The full document is availate ree by visiting: https://franchisepanda.com/franchises/mogavero-investments-llc	able foi