



**MINNESOTA  
DEPARTMENT OF  
COMMERCE**



85 7th Place East, Suite 500  
St. Paul, Minnesota 55101-2198  
www.commerce.state.mn.us  
651.296.4026 FAX 651.297.1959  
An equal opportunity employer

August 15, 2012

LEE J PLAVE  
PLAVE KOCH PLC  
12355 SUNRISE VALLEY DRIVE SUITE 230  
RESTON, VA 20191

Re: F-6138  
TUTOR DOCTOR SYSTEMS INC  
TUTOR DOCTOR F/A

Dear Mr. Plave:

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 March 31, 2013.

Sincerely,

MIKE ROTHMAN  
Commissioner

By:

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

MR:DES:dlw

F-6138

STATE OF MINNESOTA  
DEPARTMENT OF COMMERCE  
REGISTRATION DIVISION  
(651) 296-6328

IN THE MATTER OF THE REGISTRATION OF:  
TUTOR DOCTOR F/A  
By TUTOR DOCTOR SYSTEMS INC

ORDER AMENDING  
REGISTRATION

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

IT IS HEREBY ORDERED that the registration dated February 4, 2009, is amended as of the date set forth below.



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

Date: August 15, 2012

AUG 14 2012  
Rec'd \$300**UNIFORM FRANCHISE REGISTRATION APPLICATION**File No.: F-6138  
(Insert file number of immediately preceding filing of Applicant)State: **Minnesota**Fee: \$300.00

## 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

1. Full legal name of Franchisor:  
**TUTOR DOCTOR SYSTEMS INC.**
2. Name of the franchise offering:  
**"Tutor Doctor"**
3. Franchisor's principal business address:  
**2711 Centreville Road, Suite 400  
Wilmington, Delaware 19808**
4. Name and address of Franchisor's agent in this State authorized to receive service of process:  
**Commissioner of Commerce  
85 7th Place East, Suite 500  
St. Paul, Minnesota 551015**
5. The states in which this application is or will be shortly on file:  
**California, Florida, Hawaii, Illinois, Indiana, Kentucky, Maryland, Michigan, Minnesota, Nebraska, New York, North Dakota, Rhode Island, South Dakota, Texas, Utah, 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:  
**Lee J. Plave, Esq.  
Plave Koch PLC  
12355 Sunrise Valley Drive, Suite 230  
Reston, Virginia 20191  
703.774.1203 (direct phone)  
703.774.1201 (fax)  
LPlave@plavekoch.com (E-mail)**

PK 57650 – Tutor Doctor / MN

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A/L Ams

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