

85 7th Place East, Suite 500 St. Paul, Minnesota 55101-3165 www.commerce.state.mn.us 651.295.4026 FAX 651.297.1959

An equal opportunity employer

June 10, 2010

ANGELA ARNOLD THOMPSON HAYNES AND BOONE LLP 1615 L STREET NW SUITE 800 WASHINGTON, DC 20036-5610

Re: F-3683

PASSPORT HEALTH INC
PASSPORT HEALTH TRAVEL BUSINESS FRANCHISE AGREEMENT

Dear Ms. Thompson:

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, 2010.

Sincerely,

GLENN WILSON Commissioner

By:

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

GW:DES:dlw



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

IN THE MATTER OF THE REGISTRATION OF:
PASSPORT HEALTH TRAVEL BUSINESS FRANCHISE AGREEMENT
By PASSPORT HEALTH 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 September 25, 2008, is amended as of the date set forth below.

GLENN WILSON

Commissioner

Department of Commerce

85 7th Place East, Suite 500

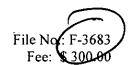
Alem Wilson

St Paul, MN 55101

Date: June 10, 2010



UNIFORM FRANCHISE REGISTRATION APPLICATION Minnesota



APPL	ICATION FOR:		
	INITIAL REGISTRATION OF AN OFFER AND SALE OF FRANCHISES		
<u>X</u>	RENEWAL APPLICATION OR ANNUAL REPORT	Seets of Marineseta Dopt. of Commercia	
	PRE-EFFECTIVE AMENDMENT	JUN 09 2010	
	POST-EFFECTIVE MATERIAL AMENDMENT	Rec'ds 500	
1.	Name of Franchisor:		
	Passport Health, Inc.		
2.	Name of franchise offering:		
•	Passport Health, Inc.		
3.	Franchisor's principal business address:		
	921 East Fort Avenue Southside Market Place Baltimore, Mary4and 21230		
4.	Name and address of Franchisor's agent in the state authorized to receive process:		
	Commissioner of Commerce 85 7 th Place East, Suite 500 St. F::ul, Minnesota 55101		
5.	The states in which this application is or will be shortly on file:		
	Californ'a, Hawaii, Illinois, Indiana, Maryland, Minnesota, New York, Rhode Island, South Dakota, Virginia, Washington and Wisconsin		
6.	Name, address, telephone and facsimile numbers, and e-mail address unications regarding this application should be directed:	of person to whom	
	Angela Arnold Thompson, Paralegal Haynes and Boone, LLP 1615 L. St. NW, Ste 800 Washington, DC 20036 Phone: (202) 654-4552 Fax: (202) 654-4277 Email: angela.thompson@haynesboone.com	-10-10 Anus 9-25-08	

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