

STATE OF MINNESOTA
DEPARTMENT OF COMMERCE
REGISTRATION DIVISION
(651) 296-2211

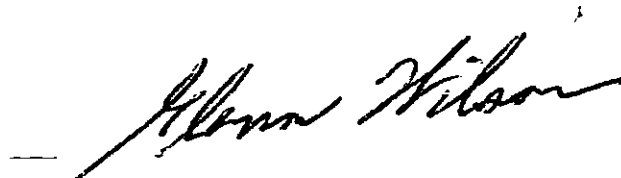
IN THE MATTER OF THE REGISTRATION OF:
NEW WELL (THE) F/A
By NEW WELL LLC (THE)

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.



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

Date: February 12, 2010
dlw

UNIFORM FRANCHISE REGISTRATION APPLICATION

FILE NO. F-6344
(Insert file number of immediately preceding filing of Applicant)

STATE: Minnesota

FEE: \$400 \$300 \$100 NONE

APPLICATION FOR (Check one only):

- INITIAL REGISTRATION OF AN OFFER AND SALE OF FRANCHISES
- RENEWAL APPLICATION OR ANNUAL REPORT
- POST-EFFECTIVE AMENDMENT
- PRE-EFFECTIVE MATERIAL AMENDMENT

FYE
9/30/09

1. Full legal name of Franchisor:

the new well, LLC

EH
2/12/2010

2. Name of the franchise offering:

the new well™

N

3. Franchisor's principal business address:

2160 NW Vine Street
Grants Pass, OR 97526

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

Minnesota Commissioner of Commerce
85 Seventh Place East, Suite 500
St. Paul, MN 55101

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

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

Mary Beth Brody
 Faegre & Benson, LLP
 2200 Wells Fargo Center
 90 South Seventh Street
 Minneapolis, MN 55402


Telephone: (612) 776-8067

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 January 8, 2010 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 Grants Pass, Oregon on 1/26, 2010

the new well, LLC

By: 
 Name: Scott Draper
 Title: President

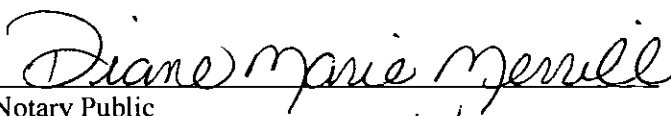
Corporate Acknowledgement

STATE OF OREGON)
) ss.
 COUNTY OF JOSEPHINE)

On this 26 day of January, 2010 before me, the undersigned Notary Public, personally appeared Scott Draper, known personally to me to be the President of the new well, LLC, and that he, as such officer, being authorized so to do, executed the foregoing Application for the purposes therein contained, by signing the name of the corporation by himself as such officer.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.




 Notary Public
 My commission expires: 2/5/14

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