

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

IN THE MATTER OF THE REGISTRATION OF:  
UBREAKIFIX REGIONAL REPRESENTATIVE F/A  
By UBIF FRANCHISING CO.

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.



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

Date: April 3, 2017  
dlw

**UNIFORM FRANCHISE REGISTRATION APPLICATION**

File No. F-8127  
(Insert file number of immediately preceding filing of Applicant)

State: Minnesota

Fee: \$400.00

**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**

State of Minnesota  
Dept of Commerce

JAN 17 2017

Rec'd \$ 400

1. Full legal name of Franchisor:

**UBIF Franchising Co.**

2. Name of the franchise offering:

**“UBREAKIFIX” – Regional Representative Offering**

3. Franchisor’s principal business address:

**200 South Orange Avenue, Suite 200  
Orlando, Florida 32801**

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

**Commissioner of Commerce - State of Minnesota  
Department of Commerce - Registration Division  
85 Seventh Place East  
St. Paul, Minnesota 55101**

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

**Illinois, Indiana, Maryland, Michigan, Minnesota, New York, Rhode Island**

FYE 12/31/17  
EFF 04/03/17

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

**Kenneth R. Costello, Esq.  
Bryan Cave LLP  
120 Broadway Suite 300  
Santa Monica, CA 90407  
(310) 576-2100 Tel  
(310) 576-2200 Fax  
Kenneth.costello@bryancave.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 August 9, 2016 as amended January 13, 2017 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 Orlando, Florida, ~~December~~ <sup>January</sup> 13, ~~2016~~ <sup>2017</sup>

**Franchisor:**

**UBIF FRANCHISING CO.**

**By:** Todd Evans

**Name:** Todd Evans

**Title:** Vice President of Franchising

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