

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

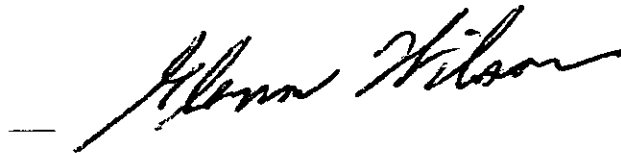
IN THE MATTER OF THE REGISTRATION OF:
USA MOBILE DRUG TESTING F/A
By USA MOBILE DRUG TESTING LLC

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.



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

Date: October 22, 2010
dlw

SEP 29 2010

Rec'd \$ 400

UNIFORM FRANCHISE REGISTRATION APPLICATION

File No.: F-10516
(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

FYE
12/31/10

4014 eff 10/22/10

N

1. Full legal name of Franchisor:
USA Mobile Drug Testing, LLC
2. Name of the franchise offering:
USA Mobile Drug Testing
3. Franchisor's principal business address:
**19046 Bruce B. Downs Blvd., #141
Tampa, Florida 33647**
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 55101**
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 Carolina, North Dakota, South Carolina, 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:
**Regina Amolsch, Esq.
Plave Koch PLC
12355 Sunrise Valley Drive, Suite 230
Reston, Virginia 20191
703.774.1211 (direct phone)
703.774.1201 (fax)
RAMolsch@plavekoch.com (E-mail)**

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 February 26, 2010, as amended July 7, 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 St Petersburg, FL on September 22, 2010.

USA Mobile Drug Testing, LLC

By: _____

Print Name and Title: Joseph Stroman
CEO

STATE OF Florida)
)
COUNTY OF Pinellas)

USA Mobile Drug Testing, LLC

Personally appeared before me this 22 day of September, 2010, the above-named USA Mobile Drug, to me known to be the person who executed the foregoing application (as USA Mobile Drug of the above-named applicant) and, being first duly sworn, state upon oath that said application, and all exhibits submitted herewith, are true and correct.

(NOTARIAL SEAL)

Notary Public: _____

My Commission Expires: _____

J. Dashaw
Aug 26, 2013

J. DASHAW
Notary Public, State of Florida
My Comm. Expires Aug. 26, 2013
No. DD970209

PK 25467.1 – USAMDT/MN

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