



COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Busch Family, LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

CHARLES H. BUSCH  
Name of Person

MC CULLOUGH Development, Inc.  
Firm/Company

210 N. 4<sup>th</sup> Suite 'C' - PO Box 1088  
Address

Manhattan, KS 66505-1088  
City/State and Zip Code

charlieb@mdiproperties.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charlie Busch at ( 785 ) 341-3219  
Name of Contact Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy     \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
2016 MAY 23 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

May 9, 2016

CHARLES H BUSCH  
210 N 4TH SUITE C, PO BOX 1088  
MANHATTAN, KS 66505-1088

SUBJECT: BUSCH FAMILY, LLC  
Ref. Number: W16000033886

We have received your document for BUSCH FAMILY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can only designate one person as the registered agent, not two.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 416A00009724

FILED  
16 MAY 23 AM 10:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:*

1. Busch Family, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Kansas 3. 45-2830647  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 5/1/16  
(Date first transacted business in Florida, if prior to registration.)  
(Sec sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 210 N. 4th, Suite C  
Manhattan, KS 66502  
(Street Address of Principal Office)

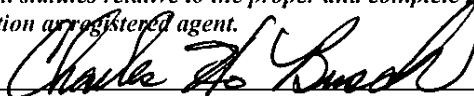
6. PO Box 1088  
Manhattan, KS 66505-1088  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Charles Busch  
Office Address: 95 Coco Plum Dr. 3F  
Marathon, FL, Florida 33050  
(City) (Zip code)

**Registered agent's acceptance:**

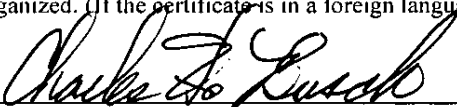
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

16 MAY 23 AM 10:35  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  
Charles H. Busch, Manager  
210 N. 4th, Suite C, PO Box 1088  
Manhattan, KS 66505-1088

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

  
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Charles H. Busch  
Typed or printed name of signee

**STATE OF KANSAS**  
**OFFICE OF**  
**SECRETARY OF STATE**  
**KRIS W. KOBACH**

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 6554075

Entity Name: BUSCH FAMILY, LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: CHARLES H BUSCH

Registered Office: 5480 W 63rd Ave, MANHATTAN, KS 66503

was filed in this office on July 26, 2011, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of April 28, 2016

A handwritten signature in black ink that reads "Kris W. Kobach". The signature is written in a cursive style.

**KRIS W. KOBACH**  
**SECRETARY OF STATE**

Certificate ID: 794408 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.