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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

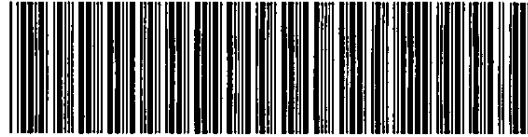
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 18 2015
S. GILBERT

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: BVM Management, Inc.

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Dane Starbuck, Esq.

Name of Person

BVM Management, Inc.

Firm/Company

C/o: Legal Department

9114 Technology Lane

Address

Fishers, Indiana 46038-2839

City/State and Zip Code

dstarbuck@libertyfund.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dane Starbuck

Name of Person

at (317) 806-6770 x 207

Area Code & Daytime Telephone Number

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

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. **BVM Management, Inc.**

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Indiana 3. 35-1046713
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 24, 1950 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. February 27, 2015
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)

7. 9114 Technology Lane, Fishers, Indiana 46038-2839
(Principal office address)

P. O. Box 501188, Indianapolis, Indiana 46250
(Current mailing address)

8. **Non-For-Profit**
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

Name: Jared K. McCowan

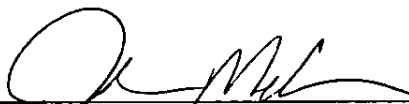
Office Address: 20015 Daytona Way

Tampa, Florida 33647-3296
(City) (Zip Code)

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TALLAHASSEE, FLORIDA

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation 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)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Robert L. Rynard, Sr

Address: 9114 Technology Lane
Fishers, Indiana 46038-2839

Vice Chairman: Rebecca J. Bartle

Address: 9114 Technology Lane
Fishers, Indiana 46038-2839

Director: Edward Fodrea, PhD

Address: 9114 Technology Lane
Fishers, Indiana 46038-2839

Director: Dana Wadman-Huth

Address: 9114 Technology Lane
Fishers, Indiana 46038-2839

B. OFFICERS

President: Robert L. Rynard, Sr

Address: 9114 Technology Lane
Fishers, Indiana 46038-2839

Vice President: Not Applicable Under Non-For-Profit

Address:

Secretary: Rebecca J. Bartle

Address: 9114 Technology Lane, Fishers, Indiana 46038-2839

Treasurer: Dana Wademan-Huth

Address: 9114 Technology Lane, Fishers, Indiana 46038-2839

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Robert L. Rynard, Sr.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Robert L. Rynard, Sr
(Typed or printed name and capacity of person signing application)

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greetings:

I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

BVM MANAGEMENT, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on February 24, 1950, and was in existence or authorized to transact business in the State of Indiana on February 27, 2015.

I further certify this Non-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twenty-Seventh Day of February, 2015.

Connie Lawson

Connie Lawson, Secretary of State

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