

**UNIFORM FRANCHISE REGISTRATION APPLICATION**

File No: \_\_\_\_\_  
Fee: \$400

**State: Minnesota**

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

1. Full legal name of Franchisor: THE BUNNY HIVE FRANCHISING, LLC
2. Name of the franchise offering: THE BUNNY HIVE
3. Franchisor's principal business address:

THE BUNNY HIVE FRANCHISING, LLC  
2715 CREEK EDGE  
POWHATAN, VIRGINIA 23139

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

MINNESOTA COMMISSIONER OF COMMERCE  
DEPARTMENT OF COMMERCE  
85 7<sup>TH</sup> PLACE EAST, SUITE 280  
ST. PAUL, MINNESOTA 55101-2198

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

CALIFORNIA, ILLINOIS, MARYLAND, MINNESOTA, NEW YORK, VIRGINIA

6. Name, address and telephone number of person to whom communications regarding this application should be directed.

KATHRYN B. SHIPE, ATTORNEY  
SHIPE DOSIK LAW, LLC  
2107 N. DECATUR ROAD, UNIT 347  
DECATUR, GEORGIA 30033-5305  
PHONE: (404) 788-4220  
kitt@shipedosiklaw.com

**DISCLOSURE VERIFICATION**

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 April 29, 2025 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.

Executed at Powhatan, Virginia on April 29, 2025.

**THE BUNNY HIVE FRANCHISING, LLC**

By: Brittany Schmid  
**BRITTANY SCHMID**  
Title: CHIEF EXECUTIVE OFFICER

State of Virginia )

County of ~~Powhatan~~ Chesterfield

On April 29, 2025 before me, Rebecca Williams (here insert name and title of notary), personally appeared BRITTANY SCHMID, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature Rebecca A. Williams (Seal)

