



CITY OF LEE'S SUMMIT, MISSOURI
APPLICATION FOR BUSINESS LIQUOR LICENSE

BUSINESS NAME Galaxy Operation LLC

Please mark ("x") which of the following licenses you will need for a Lee's Summit, Missouri establishment.

- ☐ A1 - Manufacturing, brewing malt liquor (\$300.00)
- ☐ A3 - Wholesale selling of malt liquor (\$75.00)
- ☐ B1 - Manufacturing 22% or less alcohol content intoxicating liquor (\$150.00)
- ☐ B2 - Manufacturing, distilling, blending intoxicating liquor of all kinds (\$300.00)
- ☐ B3 - Wholesale selling of 22% or less alcohol-content intoxicating liquor (\$150.00)
- ☐ B4 - Wholesale selling of intoxicating liquor of all kinds (\$375.00)
- ☐ C1 - General retail selling of malt liquors, or wine, or both, by the drink **and** in the original package (\$52.50)
- ☐ C2 - Hotel retail selling of malt liquor by the drink and in the original package \$52.50)
- ☐ C3 - Restaurant retail selling of malt liquor by the drink **and also** in the original package, **including Sunday sales** (\$75.00)
- ☐ D - Retail selling of malt liquor only in the original package, **including Sunday** (22.50)
- ☐ G1 - General retail selling of intoxicating liquor of all kinds by the drink **and** in the original package (\$450.00)
- ☐ G2 - Hotel retail selling of intoxicating liquor of all kinds by the drink **and also** in the original package (\$450.00)
- ☐ G3 - Restaurant retail selling of intoxicating liquor of all kinds by the drink **and** in the original package (\$450.00)
- ☒ H - Retail selling of intoxicating liquor of all kinds only in the original package (\$150.00)
- ☐ I - **Consuming** intoxicating liquor on premises not licensed to sell (C.O.L.) (\$90.00)
- ☐ J - Resort retail selling of intoxicating liquor by the drink (\$450.00)
- ☐ J (temp) - Resort temporary retail selling of intoxicating liquor by the drink (\$75.00 in addition to Type J)
- ☐ M - Caterer temporary location (7-day) for retail selling of intoxicating liquor by the drink (\$15.00/day)
- ☐ N - Caterer temporary location (50-day) for retail selling of intoxicating liquor by the drink (\$500.00)
- ☐ O - Caterer temporary location (unlimited) for retail selling of intoxicating liquor by the drink (\$1,000.00)
- ☐ P - Fourth of July temporary 7-day selling of wine and malt liquor by the drink (church, school, etc.) (\$150.00)
- ☐ Q - Temporary (7-day) picnic retail selling of intoxicating malt liquor by the drink (church, school, etc.) (\$15.00/day)
- ☐ R - Temporary (7-day) picnic retail selling of intoxicating liquor by the drink (\$37.50/day)
- ☒ S - **Sunday** license retail selling intoxicating liquor of all kinds (\$300.00 in addition to specific type)
- ☐ T - Amusement Place selling of intoxicating liquor of all kinds by the drink (\$450.00)
- ☐ Tasting - yearly fee in addition to specific type (\$25.00)

To be completed by applicant as (check one):

Sole Owner & Operator ☐

Corporation ☐

Partnership ☐

LLC ☒

Legal Name of Entity: Galaxy Operation LLC

Common Business Name/DBA: Galaxy Liquor

Phone: 816-753-5672

Business/Premises Address: 150 NE Tudor

Lee's Summit, MO 64086

Preferred Liquor License Mailing Address: 4600 Madison Ave. Suite 650

Kansas City, mo. 64112

(I), (We), the undersigned, hereby apply to the City of Lee's Summit, MO, for the following described license: Type
(s) OPPL + Sunday for the premises described above.

2. Are you a citizen of the United States of America? Yes If naturalized, give date and place of naturalization: _____

3. Will you be the person in active control and/or management (managing officer) of this business full-time?

No If not, give complete details on the planned management and persons involved.

I will handle liquor licensing. The LLC members will handle day to day business operations.

4. Have you or any person employed by you ever held any type of liquor license issued by the City of Lee's Summit or by the licensing authority of any state, county or city? Yes

Provide details: I serve as M.O. for several law firm clients.

5. Has any such license listed in question #4 ever been suspended or revoked? No If so, please give complete details: I have had clients receive a

warning or pay a fine to the State of Missouri.
I have been doing this for over 20 years.

6. Have you ever made application for a liquor license that was denied by the City of Lee's Summit or by the licensing authority of any state, county or city? No If so, please give complete details: _____

7. Have you or anyone interested either directly or indirectly in the premises to be licensed hereunder or the operation thereon ever been convicted of a felony? No If so, please give complete details: _____

8. If not a partnership/corporation/LLC, give names and business addresses of employers for the past five years. (If self-employed, state nature of business and location.): _____

9. Is the proposed location within 300 feet of a church or school? Yes

10. If existing business, from whom and when was the business purchased? N/A

Effective date of possession: _____ Name of mortgage holder, if any: _____

11. Will any distiller, wholesaler, wine maker, brewer, or supplier, or coin operated, commercial, manual or mechanical amusement devices or the employees, officers or agents thereof, have any financial interest in the retail business of the applicant for the sale of alcoholic beverages, or "C.O.L.", and will the applicant directly or indirectly borrow or accept from any such persons equipment, money, credit, or property of any kind except ordinary commercial credit for liquor sold? No If so, please explain: _____

12. Will applicant either directly or indirectly borrow or accept from any person identified in #11 either equipment, money, credit or property of any kind except ordinary commercial credit for liquor sold? No If so, please explain: _____

13. Please describe the business plan/daily operation of the business in detail:

One of several retail businesses located in building. This will be a package liquor store selling no more than 70% of total sales in alcohol.

14. Please list the days and hours of operation:

Monday	<u>9 am - 11 pm</u>
Tuesday	<u>"</u>
Wednesday	<u>"</u>
Thursday	<u>"</u>
Friday	<u>"</u>
Saturday	<u>"</u>
Sunday	<u>"</u>

15. Will you at all times permit the entry of any officer or investigator who may have legal supervisory authority for the purpose of inspection or search; and will you permit the removal of all things and articles which may be in violation of the ordinances of Lee's Summit, Missouri, and the laws of the State of Missouri; and do you promise and agree not to violate any of the ordinances of Lee's Summit, Missouri, the laws of the State of Missouri, or the United States in the conduct of the business for which the license is sought? _____

IF BUSINESS IS OWNED BY A PARTNERSHIP/CORPORATION/LLC, COMPLETE THIS SECTION:

Name of partnership/corporation/LLC: _____

State in which incorporated: Missouri Date of incorporation: _____

If not a Missouri partnership/corporation/LLC, date authorized to do business in Missouri: _____

Full name, complete residential address, date of birth and Social Security Number of the President, Vice President, Treasurer and Secretary of the corporation (or Members of the LLC or partnership):

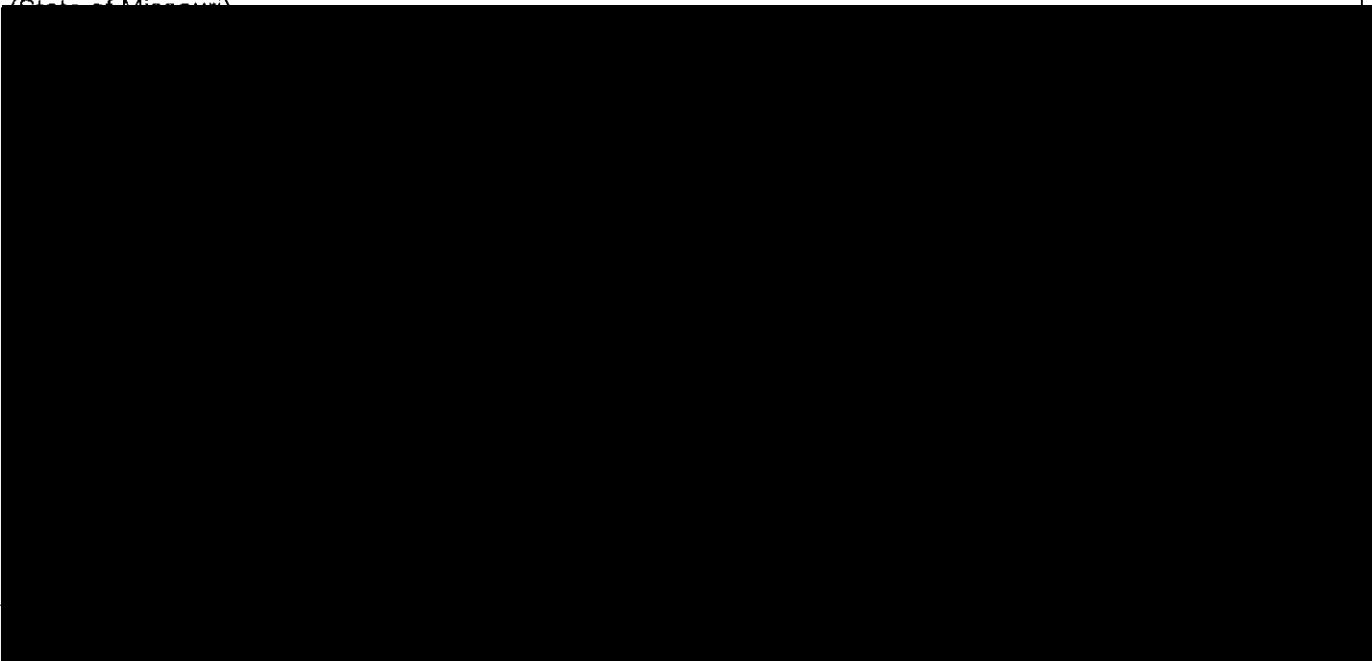
See Exhibit A

If stock is not publicly held, give names and residential addresses of all stockholders who hold 10% or more of the capital stock:

See Exhibit A

X I wish to have my home address, Date of Birth, and place of birth withheld from public disclosure (initials)

(County of Jackson)



To Be Provided By Applicant:

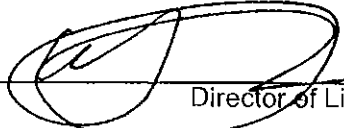
1. Identification/Qualifying documents for Applicants (Sole Owner, Partners, Managing Officers)
 - a) Copy of State or US Government issued ID and a recent photograph if different than ID picture;
 - b) Copy of Missouri voter registration card; **AND**
 - c) Copy of paid Missouri personal property tax receipt for year immediately preceding date of application
2. **Copy of Business License** (contact Treasury Department at 816-969-1139).
3. **Copy of Zoning Approval** (contact Planning & Development at 816-969-1600).
4. **Business Location Documents:**
 - a) Recent photographs of the interior and exterior of the premises to be licensed.
 - b) Complete description of the plans, specifications, and fixtures of the proposed place of business. This shall include measurements of the dimensions of the premises where alcohol will be served and sold. Include a diagram, drawing, or floor plan of the premises.
 - c) Copy of lease, mortgage, or deed showing Proof of Occupancy.
 - d) For newly constructed or remodeled businesses: Certificate of Occupancy Permit shall be obtained prior to the actual issuance of a city liquor license (contact Codes Administration at 816-969-1200)
5. **Package Liquor Sales Only:** Inventory Affidavit (attached), notarized by the applicant, stating the type of business presently engaged in, or in conjunction with, which the license shall be used; **AND** stating that in his place of business the applicant has, and at all times keeps, a stock of goods having an invoice of at least \$1,000, exclusive of fixtures and intoxicating liquors.
6. **Appropriate license fee:** Liquor license fees are prorated using the fiscal year beginning July 1, and based on the 1st day of the month the liquor license is active. Make checks and money orders payable to the City of Lee's Summit. Credit card payments are accepted with a 2.25% bank fee added to the transaction.
7. **Date of anticipated electronic fingerprint submission to the MACHS vendor:** March 3, 2025

Estimated date of opening? _____

For Office Use Only:

It is recommended this application be APPROVED / DISAPPROVED this 9th day of

May, 2025.



Director of Liquor Control

INVENTORY AFFIDAVIT
For Package Liquor Sales Only

Date: 3-27-25

Business Name: Galaxy Operation LLC

To Whom It May Concern:

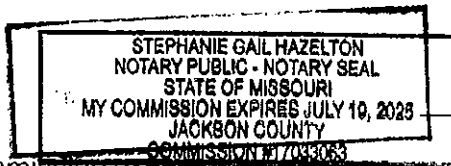
The type of business I am presently engaged in or in conjunction with which the liquor license shall be used is Package Liquor (OPR + Sunday)

I promise to keep in my place of business a stock of goods having an invoice of at least \$1,000, exclusive of fixtures and intoxicating liquors.

Nancy E. Shilton

Applicant's Signature

Subscribed and sworn to before me this 27TH day of March, 2025

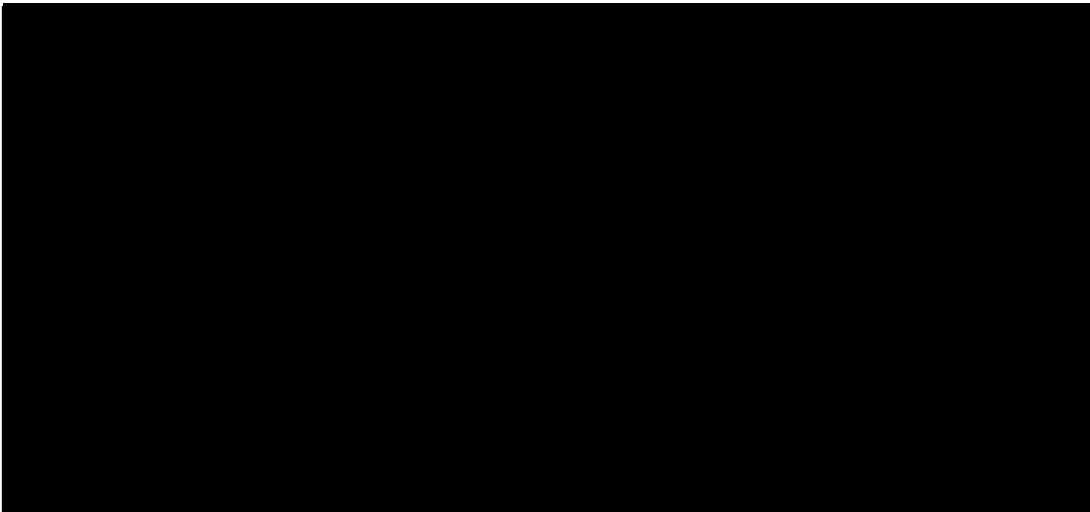


My commission expires:

July 19, 2025

Alyson G. Helder
Notary Public

EXHIBIT A



LS LEE'S SUMMIT
MISSOURI
POLICE DEPARTMENT

Re: Dissemination - Applicant Screening Notification

The City of Lee's Summit is an authorized recipient (AR) of closed criminal history record information (CHRI) pursuant to section 43.535, RSMo. and Lee's Summit City Ordinance Number 9742. The AR is authorized to receive fingerprint-based criminal history record information from the Missouri State Highway Patrol (MSHP) and the Federal Bureau of Investigation (FBI).

Fingerprint-based closed CHRI must not be made available to the general public or other unauthorized entities pursuant to numerous state and federal laws. This notification is being provided in order for the above-named AR to protect closed record information of the applicant, to ensure dissemination compliance regulations, and to verify that a fingerprint-based background check has been performed on the following individual:

Name of Applicant: Nancy Whiton

Applicant Type: Managing Officer

Date of Fingerprint Results: 04-03-25

Based on eligibility standards of the AR, the applicant:

☒ Meets eligibility standards;
☐ Does not meet eligibility standards

Professionally,

Joshua Ward #0604
Police Custodian of Records Supervisor
Lee's Summit Police Department
10 NE Tudor Road
Lee's Summit, MO 64086

Office – 816-969-1715
Desk – 816-969-1747
Fax – 816-969-1630
Direct email - joshua.ward@cityofls.net
Main Records Department Email – pdrecords@cityofls.net

References:

Section 43.532. 1 RSMo. - Criminal history and identification records obtained from the central repository shall be used solely for the purpose for which they were obtained. The subject of the record shall be afforded the opportunity to challenge the correctness, accuracy, or completeness of a criminal history record. Section 576.050.2 RSMo. - A person commits the offense of misuse of official information if he or she recklessly obtains or discloses information from the Missouri uniform law enforcement system (MULES) or the National Crime Information Center System (NCIC), or any other criminal justice information sharing system that contains individually identifiable information for private or personal use, or for a purpose other than in connection with their official duties and performance of their job.

**ZONING APPROVAL
FOR ALL BUSINESSES
EXCEPT HOME OCCUPATIONS**

DATE: 5-5-25
APPLICANT: GALAXY OPERATION LLC
BUSINESS NAME: GALAXY LIQUOR
ADDRESS: 160 NE TUDOR ROAD
TYPE OF BUSINESS: RETAIL
TELEPHONE: 816-753-5679 ZONING DISTRICT: CP-2
(To be completed by the Planning Dept.)

☒ NEW BUSINESS ☐ CHANGE OF ADDRESS
☐ CHANGE OF OWNERSHIP

If applicable, what type of business previously occupied the space? (Include name of business if known)
EMPTY BUILDING

Shell - PRCOM20234052

If locating in a previously occupied space, are there any building structural, mechanical, plumbing or electrical alterations or additions proposed? If so, please describe the nature of the alterations or additions.

NA

AFTER THIS ZONING APPROVAL FORM HAS BEEN SIGNED, AN OCCUPANTIONAL/BUSINESS LICENSE APPLICATION AND FEE MAY BE ACCEPTED FOR FINAL PROCESSING IN THE FINANCE DEPARTMENT AT LEE'S SUMMIT, MISSOURI CITY HALL.

NOTE: This form is required prior to acceptance of an application for an occupational/business license and issuance of a temporary permit to operate if the business location is within the limits of the City of Lee's Summit. New businesses with no physical location within the city do not require this form.

Alexandra Hareton
APPLICANT SIGNATURE

APPROVED BY:

[Signature]
DEPT. OF PLANNING & DEV.

- ☐ If checked, permits are required prior to performing any framing, mechanical, electrical or plumbing alterations or additions.

☒ [Signature]
CODES ADMINISTRATION
[Signature]
FIRE DEPARTMENT

★ Contingent upon going thru ~~the~~ permit process for all future tenants

GALAXY OPERATION LLC
Licensing
4600 MADISON AVENUE
KANSAS CITY, MO 64112

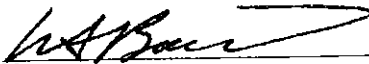
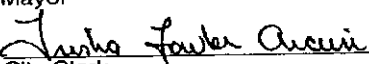


BUSINESS LICENSE

Issuance No. LC44250313

**EXPIRES :
04/30/2026**

License is Hereby Granted to: GALAXY OPERATION LLC
150 NE TUDOR RD, LEES SUMMIT, MO 64086


Mayor

City Clerk

Subject to the provisions of all Ordinances now in force and
that may hereafter be passed by said City of Lee's Summit

THIS LICENSE MUST BE DISPLAYED IN A PROMINENT PLACE AND IS NON-TRANSFERABLE



State of Missouri
Denny Hoskins, Secretary of State
Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

LC014613771
Date Filed: 2/28/2025
Denny Hoskins
Missouri Secretary of State

Articles of Organization

(Submit with filing fee of \$105.00)

1. The name of the limited liability company is

GALAXY OPERATION LLC

(Must include "Limited Liability Company," "Limited Company," "LC," "L.C.," "LLC," or "LLC")

2. The purpose(s) for which the limited liability company is organized:

TO OWN, OPERATE, LEASE AND MANAGE RETAIL OPERATIONS AND ANY OTHER LAWFUL PURPOSE

3. The name and address of the limited liability company's registered agent in Missouri is:

Stephanie G. Hazelton 4600 Madison

Suite 650

Kansas City, MO 64112

Name

Street Address: May not use PO Box unless street address also provided

City/State/Zip

4. The management of the limited liability company is vested in: ☐ managers ☒ members (check one)

5. The events, if any, on which the limited liability company is to dissolve or the number of years the limited liability company is to continue, which may be any number or perpetual: Perpetual

(The answer to this question could cause possible tax consequences, you may wish to consult with your attorney or accountant)

6. The name(s) and street address(es) of each organizer (PO box may only be used in addition to a physical street address):

(Organizer(s) are not required to be member(s), manager(s) or owner(s))

Name

Address

City/State/Zip

HAZELTON, STEPHANIE 4600 Madison Ave Ste 650

Kansas City MO 64112-3032

7. ☐ Series LLC (OPTIONAL) Pursuant to Section 347.186, the limited liability company may establish a designated series in its operating agreement. The names of the series must include the full name of the limited liability company and are the following:

New Series:

☐ The limited liability company gives notice that the series has limited liability.

New Series:

☐ The limited liability company gives notice that the series has limited liability.

New Series:

☐ The limited liability company gives notice that the series has limited liability.

(Each separate series must also file an Attachment Form LLC 1A.)

Name and address to return filed document:

Name: STEPHANIE HAZELTON

Address: Email: nancy@hlblaw.net

City, State, and Zip Code: _____

LLC-1 (10/2020)

8. Principal Office Address (OPTIONAL) of the limited liability company (PO Box may only be used in addition to a physical street address):

4600 Madison Ave Ste 650

Kansas City, MO 64112-3032

Address (PO Box may only be used in conjunction with a physical street address)

City/State/Zip

9. The effective date of this document is the date it is filed by the Secretary of State of Missouri unless a future date is otherwise indicated: _____

(Date may not be more than 90 days after the filing date in this office)

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo.)

All organizers must sign:

STEPHANIE HAZELTON

Organizer Signature

STEPHANIE HAZELTON

Printed Name

02/28/2025

Date of Signature

STATE OF MISSOURI



Denny Hoskins
Secretary of State

CERTIFICATE OF ORGANIZATION

WHEREAS,

GALAXY OPERATION LLC
LC014613771

filed its Articles of Organization with this office on the 28th day of February, 2025, and that filing was found to conform to the Missouri Limited Liability Company Act.

NOW, THEREFORE, I, Denny Hoskins, Secretary of State of the State of Missouri, do by virtue of the authority vested in me by law, do certify and declare that on the 28th day of February, 2025, the above entity is a Limited Liability Company, organized in this state and entitled to any rights granted to Limited Liability Companies.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri.
Done at the City of Jefferson, this 28th day of February, 2025.

Denny Hoskins
Secretary of State



NOT
APPROVED
FOR
CONSTRUCTION

DEL ARCHITECTURE + INC.

PROJECT: GALAXY LOGGERS

PROJECT LOG:

CONTRACT INITIATION

AS-BUILT MEASURING COMPLETE

CONTRACTOR USE SUBMIT

OWNER DESIGN REVIEW

FINAL DESIGN SUBMIT/PERMIT

PERMIT REVIEW

REVISIONS:

REVISION NO. 01

REVISION NO. 02

REVISION NO. 03

REVISION NO. 04

REVISION NO. 05

REVISION NO. 06

REVISION NO. 07

REVISION NO. 08

REVISION NO. 09

REVISION NO. 10

REVISION NO. 11

REVISION NO. 12

REVISION NO. 13

REVISION NO. 14

REVISION NO. 15

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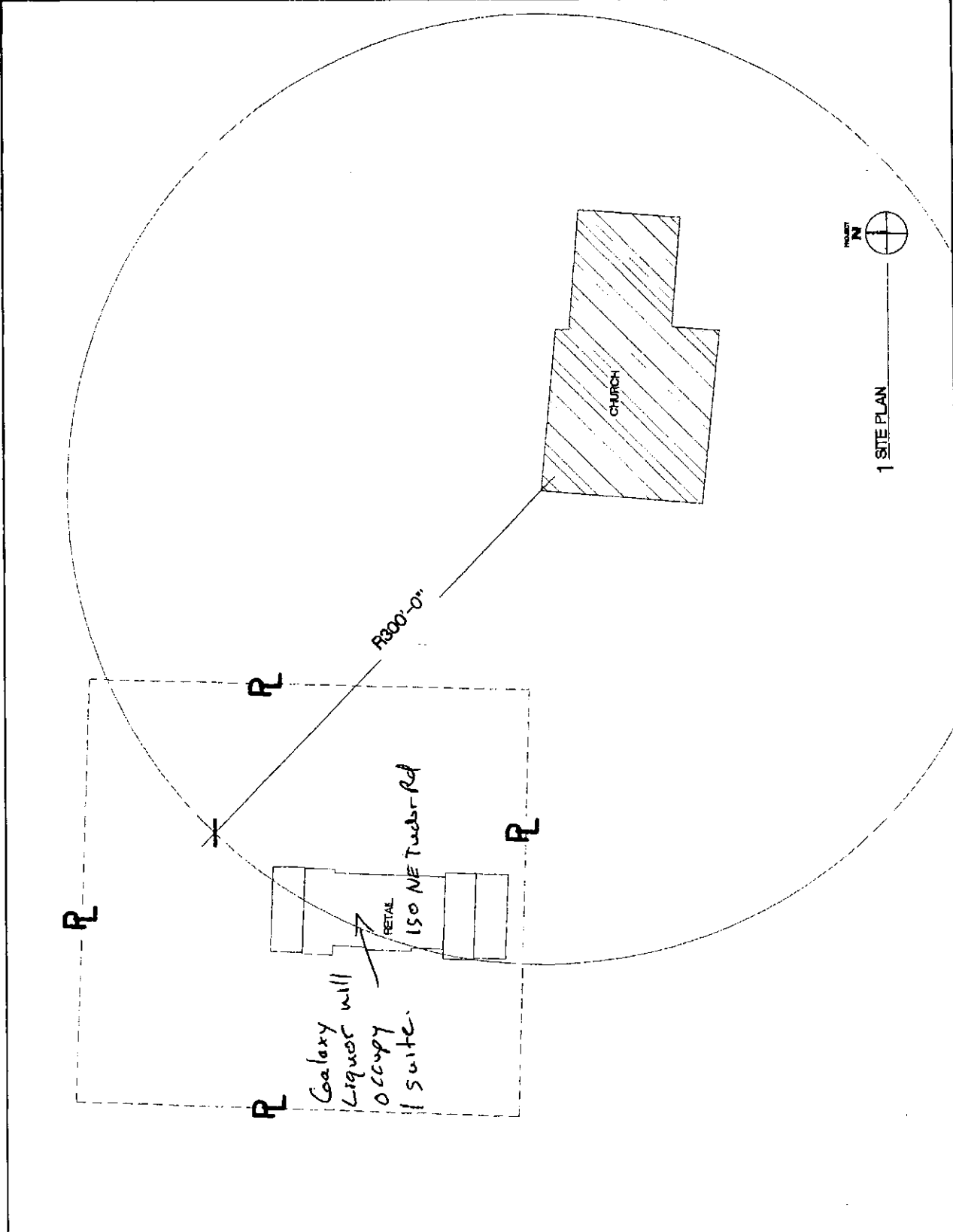
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REVISION NO. 99

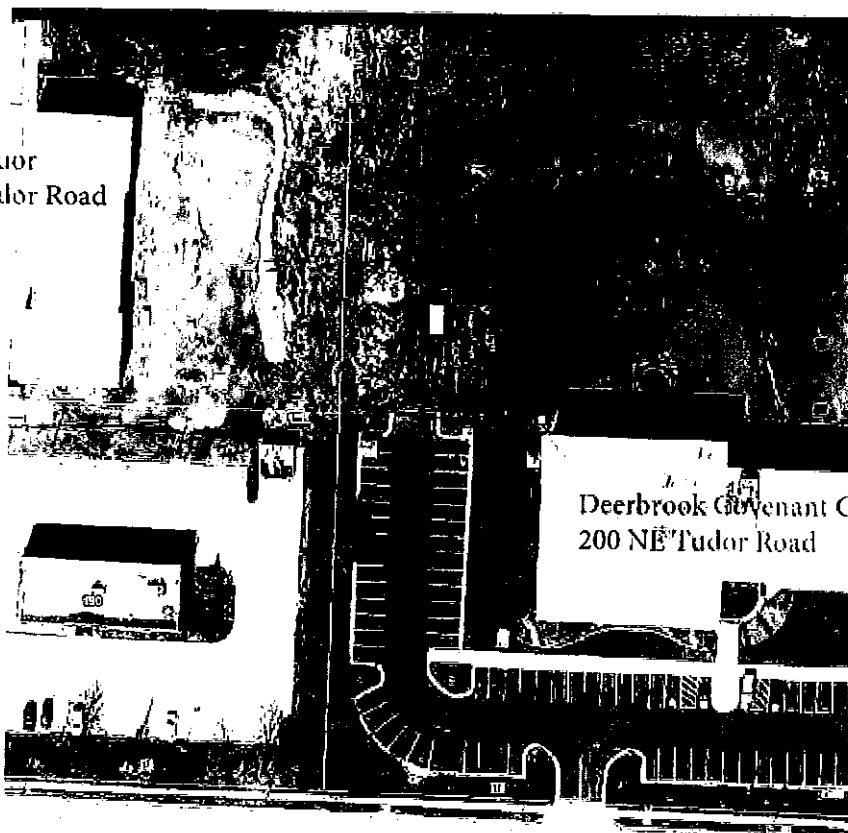
REVISION NO. 100

SHEET NO.: AC1

PROJECT NUMBER: 7



Galaxy Liquor
150 NE Tudor Road



Measurement

1 Feet (US) ▾

Measurement Result

102.1 Feet (US)

Press CTRL to enable dragging



Official Tax Payment Receipt

Receipt No.: 14510095 Date and Time: 12/16/2024 12:55 Print Date: 01/29/2025

Receipt Details

Parcel No.	Tax Year	TCA/District	Amount Applied	Unpaid Balance Amount*	Description
	2024	001		\$0.00	A/V Principal-Residential
	2024	TDDMSR		\$0.00	TDD-KC Main Street Rail

Payer Name and Address Information

Name	Address	Tender Type	Amount Tendered
WHITON NANCY E		PayIt Online	

Owner Name and Address Information

Parcel No.	Name	Address	Since	To
	WHITON NANCY E		01/01/1980	Current

Distribution of Districts

Parcel No.	Tax Year	Agency	Amount
	2024	BOARD OF DISABLED SERVICES	
	2024	CITY - KANSAS CITY	
	2024	JACKSON COUNTY	
	2024	KANSAS CITY LIBRARY	
	2024	KANSAS CITY SCHOOL #33	
	2024	MENTAL HEALTH	
	2024	METRO JUNIOR COLLEGE	
	2024	STATE BLIND PENSION	

Motor Vehicles

Parcel No.	Tax Year	Type	Make	Model	Series	Model Year	Item ID	Plate No.	Name on Title 1	Name on Title 2
No Motor Vehicle Assets Found										

Business Assets

Parcel No.	Tax Year	Category	Purchase Year
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No Business Assets Found

Real Estate Legal Descriptions

Parcel No.	Legal Line	Line No.
		1
	N 15' OF LOT 29 BLK 5 & S 16 2/3' OF LOT 30 BLK 5	2

***Interest, penalties and fees will be assessed on any unpaid balance amount.** The amount of any unpaid balance shown on this receipt is the unpaid balance amount at the time the receipt is run, exclusive of such interest, penalties and fees. Changes in the taxable value may alter your unpaid balance amount.

Failure of this payment to clear your financial institution will void this receipt. A returned item fee and late penalty may be assessed.

Please verify with your financial institution that this payment has cleared.

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Version 4.5.0.0