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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Strategy X Inc.  (Name of corporation - must include suffix)			
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.			
Please return all correspondence concerning this matter to the following:  . ARON LARSON			
(Name of Person)			
Strategy & Inc (Firm/Company)			
1502 South Ferdon Blud.			
Crestview FL 32536			
(City/State and Zip code)			
For further information concerning this matter, please call:			
(Name of Person) (Area Code & Daytime Telephone Number)			
•			
STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314			
Enclosed is a check for the following amount:			
S70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy S87.50 Filing Fee, Certified Copy			

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
1. Stratect X, MC (Enter name of corporation; shust include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
SRGX
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Nevada 3, 20-0469885 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 29, 1996 (Date of incorporation)  5. Per Detuci (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 681 Maple Ridge Rd Harrison, ME 04040 (Principal office address)
Samo as /we 7.  (Current mailing address)
(Current mailing address)
8. Home land Security - Survey Installation + Fortegration & (Purpose(s) of corporation authorized in Home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Karen Larson
Office Address: 1502 S. Ferdon Blud
Cresture , Florida <u>B2536</u> (City) (Zip code)
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.
* Min La Karon
(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 business addresses of officers and/or directors:

A. DIRECTORS	
Chairman: Richard A. Dabrey	
Address: 148 Wild Flower lane	
Walnut CA 91789	•
Vice Chairman: Clifford A Lewis	
Address: 303 Naples Rd.	
Harrison, ME 04040	
Director:	
Address:	
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Di-	<u></u>
Director:	d.:
Address:	<del> </del>
The state of the s	Prog
B. OFFICERS	PER OS
President: Clifford A. Lewij	-55 E 11
Address: 303 Naples Rd	25 27 5
Harrison, ME 04040	Ac 2 111
Vice President:	Fs - []
Address:	##
727	,,t
Secretary: Cliftord A. Lewij	
Address: 303 Naples Rds Harrican, ME 04040	
Treasurer: Richard A. Dabrey	
Address: 148 Wildflower Lane, Walnut CA 91789	
Address. The district of the state of the st	-,,,,
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	nd/or directors,
13. Clothed G D'	
(Signature of Director or Officer listed in number 12 of the application)	
14. Clifford A. Lewil Prestident + CEO	
(Typed or printed name and capacity of person signing application)	



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **STRATEGY X, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since April 29, 1996, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on November 23, 2004.

DEAN HELLER
Secretary of State
By

Certification Clerk