

M190000000504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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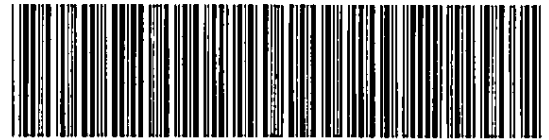
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T SCHROEDER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MCD Tactical Group, 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:

Christopher M Dziuba

Name of Person

MCD Tactical Group, LLC

Firm/Company

3206 35th St W

Address

Lehigh Acres, FL 33971

City/State and Zip Code

cdziuba@mcdtacticalgroup.com

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

For further information concerning this matter, please call:

Chris Dziuba

239

284-3464

at (_____) _____

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

**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. MCD Tactical Group, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

MCDTacGroup, 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. State of Tennessee 3. 83-2915787
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. No Transactions Yet
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3206 35th St W 6. 3206 35th St W
(Street Address of Principal Office) (Mailing Address)
Lehigh Acres, FL
33971 Lehigh Acres, FL
33971

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

Name: Christopher Dziuba
Office Address: 3206 35TH ST W
Lehigh Acres, Florida 33971
(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)

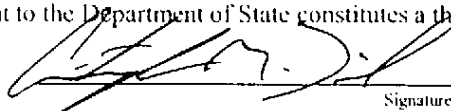
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Owner</u>	<u>Christopher Dziuba</u> <u>3206 35TH ST W</u> <u>Lehigh Acres FL 33971</u>	<u>N/A</u>	<u></u>
<u>N/A</u>	<u></u>	<u>N/A</u>	<u></u>

(Use attachments if necessary)

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)

10. 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.


Signature of an authorized person

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19 JAN 14 PM 12:45
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



Tre Hargett
Secretary of State

Division of Business Services
Department of State

State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

CHRISTOPHER DZIUBA
CHRISTOPHER DZIUBA
3206 35TH ST W
LEHIGH ACRES, FL 33971

January 12, 2019

Request Type: Certificate of Existence/Authorization
Request #: 0302165

Issuance Date: 01/12/2019
Copies Requested: 1

Document Receipt

Receipt #: 004455745 Filing Fee: \$20.00
Payment-Credit Card - State Payment Center - CC #: 3747669865 \$20.00

Regarding: MCD Tactical Group, LLC

Filing Type: Limited Liability Company - Domestic
Formation/Qualification Date: 12/21/2018
Status: Active
Duration Term: Perpetual
Business County:

Control #: 1001005
Date Formed: 12/21/2018
Formation Locale: TENNESSEE
Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

MCD Tactical Group, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

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