M21000000006

(Requestor's Name)				
(Address)				
(Áddress)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
W21000059775				

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 3, 2021

TRACI BASCUE 3308 FLORAMAR TERRACE NEW PORT RICHEY, FL 34652

SUBJECT: STRATEGIC RADIUS, LLC

Ref. Number: W21000059775

We have received your document for STRATEGIC RADIUS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott Document Specialist II

Letter Number: 621A00009050

RECEIVED

www.sunbiz.org

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COVER LETTER

SUBJECT: _	trategic Radius, LLC						
	Name of Limited Liability Company						
The enclosed " Existence, and	Application by Foreign Limited Liability Cocheck are submitted to register the above re	ompany for Authorizat ferenced foreign limite	ion to Transact Business in Florida d liability company to transact bus	ı," Certi siness ir	ficate of		
Please return a	all correspondence concerning this matter to	the following:					
	Traci Bascue						
		Name of Person		_ -			
	Strategic Radius LLC			_			
	Firm/Company (2)						
	3308 Floramar Terrace			21 HA			
		Address	25				
	New Port Richey, FL 34652			σ) (
	Ci	ty/State and Zip Code		- P# (\Box		
	tbascue@strategicradsius.com		177	ဒ္ <u>.</u> _ 0			
	E-mail address: (to be	used for future annua	report notification)				
For further in	nformation concerning this matter, please cal	1:					
Traci Bascue		770 at (8072316				
	Name of Contact Person	Area Code	Daytime Telephone Numbe	r			
Mailing Address:		Street Address:					
Registration Section		Registration Section					
Division of Corporations		Division of Corporations					
	D. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Ta	llahassee, FL 32314						
		rananassee,	I. F. 25202				
Enc	closed is a check for the following amount:	n a nark ar ker zar etr	, me				
	ase make check payable to: FLORIDA DEI \$125.00 Filing Fee S130.00 Filing Fe	2c & 🔲 \$155.00 F	iling Fee & 🗏 \$160,00 Filing I	Fee Car	tificate		

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:

		nility Company, "L.L.C." or "LLC."
	3	_
foreign limited liability company is organized)	(FE) number	r, if applicable)
		202 33
(Date first transacted business in Florida, if prior to reg (See sections 605,0904 & 605,0905, F.S. to determine	istration.) penalty liability)	
	821 Hendon Ave #149451	
	(Mailing Address)	65 T 171
52	Orlando, FL 32814	
· · · · · · · · · · · · · · · · · · ·	N	77A -
		· 🔚 o
rik Hawks		
767 New Broad St.		
	32814	
Prlando	, Florida	
	(Date first transacted business in Florida, if prior to reg (See sections 605.0904 & 605.0905, F.S. to determine	(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 821 Hendon Ave #149451 6. (Mailing Address) Orlando, FL 32814 of Florida registered agent: (P.O. Box NOT acceptable)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:		Name and Address:
≘ Manager	Name: Strategic Radius Services, LLC	□Manager	Name:	
□Member	Address: 821 Herndon Ave #149451	□Mcmber	Address:	
□Authorized	Orlando, FL 32814	□Authorized		
Person		Person		
□Other	Other	Other	· 	Other
□Manager	Name: Hawks Strateg <u>v</u> , LLC	□Manager	Name:	(a 12
■Member	Address:	□Member	Address:	500 TA
□Authorized	Orlando, FL 32814	□Authorized		17 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Person		Person		<u> </u>
Other		Other		ÖΩther ω
				台 5
□Manager	Name:	□Manager	Name:	
□Member	821 Hemdon Avc. #149451 Address:	□Member	Address: _	
Authorized	Orlando, FL 32814	□Authorized		
Person		Person		
Other	Other	Other		□Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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.

William S. Bascue

Typed or printed name of signee



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STRATEGIC RADIUS, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TENTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STRATEGIC RADIUS, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF AUGUST, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203162997

Date: 05-10-21