M240000000291

(Requestor's Name)
(Address)
, and and
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W24-61489
0000 (9190)





600426924536

94/02/24--91035--017 **155.00

SECRETARY OF STATE
DIVISION OF COMPORATIONS





April 18, 2024

DAN O'CONNOR 1834 WALDEN OFFICE SQUARE SUITE 500 SCHAUMBURG, IL 60173 US

SUBJECT: CADIA FINANCIAL GROUP, LLC

Ref. Number: W24000061489

We have received your document for CADIA FINANCIAL GROUP, LLC and check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

Letter Number: 124A00008454

Ariel Jones Regulatory Specialist II

COVER LETTER

 $(x,y) \in \mathbb{R}^{n}(X_{n} \cap Y_{n})$

Registration Section

TO:

UBJECT:	Cadia Financial Group, LLC
	ne of Limited Liability Company
he enclosed "Application by Foreign Limited Liability xistence, and check are submitted to register the above	Company for Authorization to Transact Business in Florida." Certificate of referenced foreign limited liability company to transact business in Florid
lease return all correspondence concerning this matter	to the following:
	Dan O'Connor
	Name of Person
A	anselmo & Wojcicki, LLP
	Firm/Company
1834 V	Valden Office Square Suite 500
	Address
	Schaumburg, 11, 60173
	City/State and Zip Code
r	nicole@anselmollp.com
E-mail address: (to b	e used for future annual report notification)
for further information concerning this matter, please ca	alt:
Dan O'Connor	630 359-8560 x215 at ()
Name of Contact Person	Area Code Daytime Telephone Number
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	BADDELEVE AND OF ATED
Please make check payable to: FLORIDA DE S125.00 Filing Fee S130.00 Filing Fe	
Certificate	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 005,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY. COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign	LLC Limited Liability Company, must include "Limited	Liability Comp	xiny, ""[, [, C ," or "LLC")	
t'	name adopted for the purpose of transacting business in H	ords the sherner	s name must mediate "Limited Liability Com	Name " "
	tank adopted to the purpose of damsacting business in the	orida The anerian	chancing merade trained marries to an	waity. 1711. C. The Company
Illinois 		3	(FEI number, if applies	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI number, (l'applica	ıbleı —
3/12/2024				
·	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determi	registration) ne penalty liability	1	
444 W Lake Street, Su	ite 1700	2511	North Grady Avenue Unit 87	
street Address of Principal Office)		6	(Mailing Address)	
Chicago, IL 60606		Tam	pa, F1, 33607	D
				ZAY SIOK
	_		<u> </u>	
. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT accep	iable)	72
Name:	Corporation Service Company			4 MAY 16 PH 4: 00
41110.	1201 H Strt		-	
Office Address:	1201 Hays Street		_	
	Tallahassee		32301	
			_ , Florida	
	(City)		(Zip code)	

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.

Tasha Cooper	Assistant Secretary	
(Registered agent's stenature)		



8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

litle or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: Patrick Jarvis	□Manager	Name: Patrick Jarvis
∃Member	Address: 2511 North Grady Avenue	■Member	Address: 2511 North Grady Avenu
∃Authorized	Unit 87, Tampa, FL 33607	□Authorized	Unit 87, Tampa, FL 33607
Person		Person	
Other	Other	□Other	Other
]Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
JAuthorized		□Authorized	
Person		Person	
∃Other	Other	□Other	Other
		:	
∃Manager	Name:	□Manager	Name:
]Member	Address:	□Member	Address:
]Authorized		□Authorized	
Person		Person	
Other	Other	Other	□ Other

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	
Patrick Jarvis	
Typed or printed name of signee	

File Number

0763457-9



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the

Department of Business Services. I certify that

CADIA FINANCIAL GROUP, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MARCH 04, 2019, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 30TH

day of **APRIL** A.D.2024

Authentication #: 2412104190 venifiable until 04/30/2025 Authenticate at: https://www.ilsos.gov

SECRETARY OF STATE