

112500007195

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

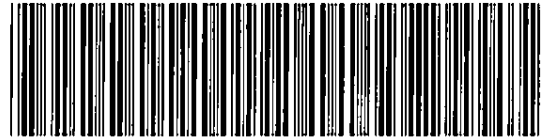
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED
2025 MAY 16 AM 10:29
RECEIVED
2025 MAY 16 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FL

T. LEMIEUX

MAY 19 2025



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations
From: Amanda Miller
Ext: x62969
Date: 05/16/25
Order #: 2220059-1
Re: Radian REM LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$160.00 - FL State Account Number:
I20000000195

Certificate of Good Standing from State of Incorporation

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

A handwritten signature in black ink, appearing to read 'A. Miller', is written over the 'Special Instructions' field.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Radian REM 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:

Tami Bohm

Name of Person

Radian

Firm/Company

550 E. Swedesford Rd., #350

Address

Wayne, PA 19087

City/State and Zip Code

regulatory@radian.com

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

For further information concerning this matter, please call:

Tami Bohm

215

231-1335

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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. Radian REM LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. Utah 3. 20-5639099
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. n/a
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 7730 S. Union Park Avenue, #550 6. 7730 S. Union Park Avenue, #550
(Street Address of Principal Office) (Mailing Address)
Midvale, UT 84047 Midvale, UT 84047

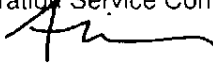
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

FILED
2025 MAY 16 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Corporation Service Company
By: 
(Registered agent's signature)

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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: <u>Tim Reilly</u>	☐ Manager	Name: _____
☐ Member	Address: <u>Radian</u>	☐ Member	Address: _____
☒ Authorized	<u>7730 S. Union Park Ave., #550</u>	☐ Authorized	_____
Person	<u>Midvale, UT 84047</u>	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☒ Manager	Name: <u>Roberto Vannucchi</u>	☐ Manager	Name: _____
☐ Member	Address: <u>Radian</u>	☐ Member	Address: _____
☒ Authorized	<u>7730 S. Union Park Ave., #550</u>	☐ Authorized	_____
Person	<u>Midvale, UT 84047</u>	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☒ Manager	Name: <u>Tami Bohm</u>	☐ Manager	Name: _____
☐ Member	Address: <u>Radian</u>	☐ Member	Address: _____
☒ Authorized	<u>550 E. Swedesford Rd., #350</u>	☐ Authorized	_____
Person	<u>Wayne, PA 19087</u>	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.

Tami A. Bohm

Signature of an authorized person

Tami A. Bohm

May 15, 2025

CERTIFICATE OF EXISTENCE

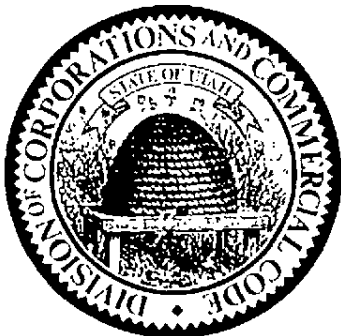
Registration Number: 6329896-0160
Business Name: RADIAN REM LLC

May 15, 2025

CERTIFICATE OF EXISTENCE

Registration Number: 6329896-0160
Business Name: RADIAN REM LLC
Principal Office Address: 7730 SOUTH UNION PARK AVENUE, #550, MIDVALE, UT 84047
Registered Date: 09/18/2006
Entity Type: DOMESTIC LIMITED LIABILITY COMPANY
Current Status: ACTIVE - CURRENT

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division unless the status above is delinquent; and, that Articles of Dissolution have not been filed.



Adam Watson

Adam Watson

Director

Division of Corporations and Commercial Code

Certificate Number: 202505151420211

Enter the certificate number at <https://businessregistration.utah.gov/> to verify this certification.