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| Special Instructions to Filing Officer: | | | | | | | |
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| Please | return all corre | spondence co | oncerning this m | natter to the fo | ollowing: | | | _ |
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| For fur | ther information | n concerning | this matter, ple | ase call: | | ! | JAN Z | 7 |
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| | STREET/CO New Filing So Division of C Clifton Build 2661 Executiv Tallahassee, F | ection orporations ing ve Center Circ | | | MAILING A New Filing S Division of C P.O. Box 63 Tallahassee, | Section Corporations 27 | | |
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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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date first transacted business in Florida, if prior to registration) 607.1502. F.S., to determine penalty liability (Current mailing address) (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: Office Address: 6 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. (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: \ Address: Vice Chairman: Address: Director: Address: __ Director: _ Address: ___ **B. OFFICERS** President: Address: Vice President: Address: Secretary: _ Address: _ Treasurer: Address: __ NOTE: If necessary, you may plact an addendum to the application thating additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)

/(Typed or printed name and capacity of person signing application)

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CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts 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, Q1W INVESTMENTS, 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 September 26, 2006, and is in good standing in this state.

SENT OF THE STATE OF THE STATE

Electronic Certificate
Certificate Number: C20090120-2482
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 20, 2009.

ROSS MILLER Secretary of State