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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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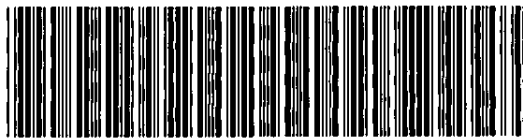
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 APR 21 PM 12:59

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

10 APR 21 PM 1:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers APR 21 2010

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: eLayaway, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Matt Mathews, Attorney at Law

Name of Person

Mathews Law Firm, P. A.

Firm/Company

277 Pinewood Drive

Address

Tallahassee, Florida 32303

City/State and Zip code

doug.salie@elayaway.com

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

For further information concerning this matter, please call:

Matt Mathews, Attorney at Law

Name of Person

at

(850)

Area Code & Daytime Telephone Number

681-9303, Ext. 1

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section -
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☒ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

**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.*

1. eLayaway, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"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)

2. Delaware 3. 20-8235863
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/26/2006 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Date of Registration
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1625 Summit Lake Drive, Hillside Building, Suite 205, Tallahassee, Florida 32317
(Principal office address)

1625 Summit Lake Drive, Hillside Building, Suite 205, Tallahassee, Florida 32317
(Current mailing address)

8. Any and all lawful business
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

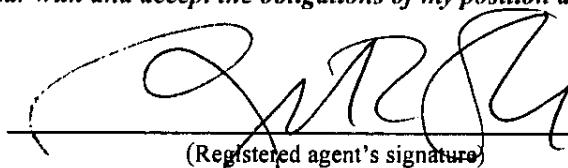
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Douglas Salie

Office Address: 1625 Summit Lake Dr., Hillside Bldg., Ste 205
Tallahassee, Florida 32317
(City) (Zip code)

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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Douglas Salie

Address: 1625 Summit Lake Drive, Hillside Building, Suite 205

Tallahassee, FL 32317

Vice Chairman: Sergio Pinon

Address: 1625 Summit Lake Drive, Hillside Building, Suite 205

Tallahassee, FL 32317

Director: Bruce Harmon

Address: 1625 Summit Lake Drive, Hillside Building, Suite 205

Tallahassee, FL 32317

Director: _____

Address: _____

B. OFFICERS

President: Douglas Salie (Chief Executive Officer)

Address: 1625 Summit Lake Drive, Hillside Building, Suite 205

Tallahassee, Florida 32317

Vice President: Sergio Pinon (Chief Marketing Officer)

Address: 1625 Summit Lake Drive, Hillside Building, Suite 205, Tallahassee, Florida 32317

Secretary: Sergio Pinon (Chief Marketing Officer)

Address: 1625 Summit Lake Drive, Hillside Building, Suite 205, Tallahassee, Florida 32317

Treasurer: Bruce Harmon (Chief Financial Officer)

Address: 1625 Summit Lake Drive, Hillside Building, Suite 205, Tallahassee, Florida 32317

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. Douglas Salie, President, Chief Executive Officer and Director

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

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ELAYAWAY, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF APRIL, A.D. 2010.

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TALLAHASSEE, FLORIDA

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You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7940215

DATE: 04-19-10