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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: KEYWAY HOMES & Properties, 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:
DARYL W Noonan JR Name of Person
KEYWAY HOMES Firm/Company
Firm/Company
3116 SArAtogA DR
Address
KISSIMMEG, FL 34743
City/State and Zip code
Address KISSIMMEE, FL 34743 City/State and Zip code Charyl & Keyway Homes. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
For further information concerning this matter, please call:
DARY (Noong n at (401) 400 - 9205 SS = SS
Name of Person Area Code & Daytime Telephone Number
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 \$\Boxed{\sigma} \$78.75 Filing Fee & \$\Boxed{\sigma} \$78.75 Filing Fee & \$\Boxed{\sigma} \$87.50 Filing Fee, Certificate of Status & Certified Copy

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," "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) (State or country under the law of which it is incorporated) (FEI number, if applicable) November, 20 2012

(Date of incorporation)

5. Perpe Lund
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3116 SARA LOGA OF KISSIMMEE FL 34743
(Principal office address) (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:

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:

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Chairman:	··· <u>· · · · · · · · · · · · · · · · · </u>
Address:	
Vice Chairman:	
Address:	
Director: Address:	
Director:	
Address:	
	····
B. OFFICERS	
President: DARYL M NOONAN JR	
Address: 3116 SARA + OGA DR	
KISSIMMEE, FL 34743	
VICE FIESIDEIII. CHANGO PORTA	<u>ವ</u>
Address: 3/16 JARA to ga DR	<u> </u>
KISSIMMEE, FL 34743	7
Secretary: CHARIOHE ONORAN 555	
Address: 3116 JARA FOGA DR	3
Treasurer: DARYL M NOOMAN JR	
Address: 31/6 SARAHOGA DR	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or director	rs.
13. April 17 President	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts state are true and that he or she is aware that false information submitted in a document to the Department of State of a third degree felony as provided for in s.817.155. F.S.	
14. DARYL M NOOMAN FR	
(Typed or printed name and capacity of person signing application)	

SECRETARY OF STATE



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, **KEYWAY HOMES & PROPERTIES, 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 November 20, 2012, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20130123-2082
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 May 23, 2013.

ROSS MILLER Secretary of State SECRETARY OF STATE