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(Re	equestor's Name)				
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL.			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					
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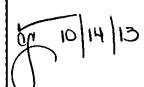


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SECRETARY OF STATE
DIVISION OF CORPORATIONS



# **COVER LETTER**

TO: New Filing Section Division of Corporations					
SUBJECT: GREENWAY VENTURES 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:					
DOMENICK CALDERONE Name of Person  GREENWAY VENTURES, INC  Firm/Company  496 OAK CANOPY CIRCLE  Address					
Name of Person					
GREENWAY VENTURES, INC					
Firm/Company					
496 OAK CANOPY CIRCLE					
Address					
AUON PARK, FZ 33825 City/State and Zip code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
DOMENICK CALDENONE at (863) 873-4053  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  Enclosed is a check for the following amount:					
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$\Bigcup \text{\$70.00 Filing Fee & Certificate of Status}\$ \$\Bigcup \text{\$78.75 Filing Fee & Certified Copy}\$\$\$ \$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. GRENWAY UENTURES INCORPORATED

(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. GEORGIA
(State or country under the law of which it is incorporated)

4. JANUARY 6, 2009
(Date of incorporation)

3. 26-4042559
(FEI number, if applicable)

CDuration: 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) 496 OAK CANOPY CIRCLE AVON PARK, FL 33825
(Principal office address) (Principal office address)

496 OAK CANGLY CIRCLE AVON PARK, PL 33825
(Current mailing address) Reac es 747e

(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) DOMENICK CALDERONE 496 OAK CANOPY CIRCLE

ANDN PARK Florida \$ 33825

(City) (Zip code) 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.

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.

12.4	Names	and	business	addresses	of officers	and/or	directors:

FILED
SECRETARY OF STATE
HVISION OF CORPORATIONS

A. DIRECTORS	William Com Olivitors
Chairman: RALPH WALTER	13 OCT 11 PM 4: 09
Address: ONE PARK UISTA CAME .	SUITE 630
WINSTON-SALEM, NC	27/0/
Vice Chairman: DOMENICK CALDERONE	
Address: 496 OAK CANOPY CIRC	ile
AUN PARK, FL 336	729
Director: RALPH WALTER	
Address: ONE PARK UISTA LAWE	SUME 630
WINSTON - SALEN, NC	27/0/
Director: DOMCNICK CARDERUNE	
Address: 496 OAK CANOPY CI	RCCE
AVON PARK, R 33	3825
B. OFFICERS	
President: DOMENICK CARDERONE	
Address: 496 OAK CHUOPY CIRC	ile
AZON PARK, FZ 33	758
Vice President: RACPH WACTER	
Address: ONE PALK USTA CAN'E	- Carlotte
WINSTON-SALEM, NC	27/07
Secretary: DOMENICK CALDERONE	
Address: 496 OAK CANOPY CIRC	CLE AVON PACK, FL 33825
Treasurer: RACPH WALTER	
Address: ONE PARK UISTA LANE SUITE	630 WINSTUN-SACEM, NC 2710,
NOTE: If necessary, you may attach an addendum to the application 13.  Signature of Director or Of	_
The officer or director signing this document (and who is listed in num are true and that he or she is aware that false information submitted in a third degree felony as provided for in s.817.155, F.S.  DOMETUICK CALDERONE	nber 12 above) affirms that the facts stated herein
14	

## STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower \(\frac{1}{2}\) Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER DATE INC/AUTH/FILED: January 06, 2009 JURISDICTION

: Georgia

: 09003263

PRINT DATE

: 10/9/2013 10:53:37 AM

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

### **GREENWAY VENTURES INC** A Domestic Corporation

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Brian P. Kemp Secretary of State

Tracking #: fllc8oSg