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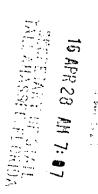
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		"

Office Use Only



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MAY 03 2016 J SHIVERS

COVER LETTER

	Registration Section Division of Corporations		
SUBJE	ECT: HANAWAY DEVELOPY Name of corporation	MENT, INC.	
	Name of corporation	n - must include suffix	
Dear Si	r or Madam:		
"Certifi	closed "Application by Foreign Corporation for cate of Existence," or "Certificate of Good State eferenced foreign corporation to transact busing	inding" and check are sub	
Please r	return all correspondence concerning this matte	er to the following:	
RE	Name of		
	Name of	f Person	
HA	Name of HNAWMY DEVELOPMENT, INC. Firm/Con		
	Firm/Co	mpany	
111	NORTH WABASH AVE. O	WIT 1421	
	Add	ress	
CH	11CAGO, IL 6060Z		
$\overline{}$	City/State	and Zip code	
KE	(1CAGO, 1L 6060Z City/State 7D (2) HANAWAY DEV. CO E-mail address: (to be used	M	·
	E-mail address: (to be used	for future annual report r	notification)
For furt	her information concerning this matter, please	call:	
Rei	D F JOHNSON at (650) Name of Person Area Co	996-44	154
	Name of Person Area Co	de Daytime Telep	hone Number
	STREET/COURIER ADDRESS: Registration Section	MAILING A Registration S	ection
	Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
	2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, F	
Enclose	d is a check for the following amount:		
□ \$70.0	00 Filing Fee	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	E WITH SECTION 607.1503, FLORIDA ST REIGN CORPORATION TO TRANSACT E		
, HANA	•		
(Enter name of co	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	···
	WAY PROPERTIES able in Florida, enter alternate corporate name a	adouted for the surrous of the same in the	
		117 12270 (0	siness in Florida)
2. STATE C	y under the law of which it is incorporated)	47 - 130 22_69 (FEI number, if applica	h(a)
	2014	(FEI number, it applica	oie)
4. <u>VULI 6</u>	of incorporation) 5.	(Date of duration, if other than	nernetual)
·		(Sale of asiation, it oals, than	porporuur,
6		02, F.S., to determine penalty liability)	
7. 111 No	MITH WARREN AUE., U	NIT 1421, CHICAGO, 1	L 6060Z
712 S	OUTH HOWARD AVE., UN	al office address) 17359, TAMPA, FL	33606
	(Current mailin	g address, if different)	A
8. Name and stree	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	16 AP \$2.030 \$1.038
Name:	KEID F JOHNSON		R 28
Office Address:	712 SOUTH HOWARD AVE	<u>, U</u> NIT 359	The survey
	TAMPA	, Florida_33696	
	(City)	(Zip code)	<u> </u>
designated in this	ed as registered agent and to accept servi application, I hereby accept the appointn	nent as registered agent and agree to	act in this capacity. I
juriner agree to co duties, and I am fo	omply with the provisions of all statutes ramiliar with and accept the obligations of	elative to the proper and complete po f my position as registered agent.	erformance of my
_ 	(Registered a	gent's signature)	
10. Attached is a	certificate of existence duly authenticated,	not more than 90 days prior to delive	ry 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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: REID F JOHNSON
Address: 712 SONTH HOWARD AVE., UNIT 359
Address: 712 SONTH HOWARD AVE., UNIT 359 TAMPA, FL 33606
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: REID F. JOHNSON
Address: 712 SOUTH HOWARD AVE, UNIT 359
TAMPA, FL 33606
Vice President:
Address:
Secretary: REID F. JOHNSON
Address: 712 SOUTH HOWARD ANE., UNIT 359, TAMPA, FL 33606
Treasurer: REDFJOHNSON
Address: 712 SOUTH HOWARD AVE., UNIT 359, TAMPA, FL 33606
NOTE: If peressary, you may attach an addendum to the application listing additional officers and/or directors.
12.
Signature of Director or Officer
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.
13. KEID F, JOHNSON, FRESIDENT (Typed or printed name and capacity of person signing application)

File Number

6968-918-3



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

HANAWAY DEVELOPMENT, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 02, 2014, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 22ND day of APRIL A.D. 2016.

Authentication #: 1611301828 verifiable until 04/22/2017

Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE