# H900001941

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to F	Filing Officer:	
		_

Office Use Only



300335472303

10/23/19--01014--018 \*\*87.50

2019 OCT 23 PH 3: 54

T GLASS 0CT 31 2019

### COVER LETTER

TO:	Registration Secti						
	Division of Corpo BOTANAW						
SUBJ	ECT:						
		Name of co	rporation	- must i	nclude suffix		
Dear S	ir or Madam:						
"Certi		or "Certificate of C	Good Stan	ding" an	nd check are su	act Business in Florida," bmitted to register the	
	return all correspor JRGESS	idence concerning t	his matter	to the fo	ollowing:		
BOTA	NAWAY, INC.		Name of I	Person			_
	· 			_			
245 N	ORTH OCEAN DRIV		Firm/Com	pany			
DEER	Address DEERFIELD BEACH FL 33441						2013
JIM@E	City/State and Zip code JIM@BOTANAWAY.COM					<u> </u>	
	1.4	E-mail address: (to	be used f	or future	annual report	notification)	س <u>۔</u> ۔۔
For fu	ther information co	ncerning this matte	r, please c	all:			ءَ دب
Jim Bu	ırgess	!	954	557 -	3562		<u>ن</u> 10
	Name of Person	at (	Area Code	_)	Daytime Telep	phone Number	
	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Country Tallahassee, FL 3	on rations enter Circle			MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section forporations 7	
Enclos	ed is a check for the	following amount:					
<b>□</b> \$70	0.00 Filing Fee C	S78.75 Filing Fed Certificate of Sta			Filing Fee & ed Copy	\$87.50 Filing Fee, Certificate of Stat 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. BOTANAWAY, 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) VIRGINIA - US 82 - 1753336 (State or country under the law of which it is incorporated) (FEI number, if applicable) MAY 22, 2017 (Date of duration, if other than perpetual) (Date of incorporation) N-A 6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2118 LAKE AVENUE - RICHMOND, VA 23230 (Principal office address) 245 NORTH OCEAN DRIVE #304 - DEERFIELD BEACH, FL 33441 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) JIM BURGESS Name: 245 NORTH OCEAN DRIVE #304 Office Address: DEERFIELD BEACH (City) 9. 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) 10. Attached is a certificate of existence duty authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Sceretary of State or other official having custody of corporate records in the jurisdiction

under the law of which it is incorporated.

11. Nam	nes and business addresses of officers and/or directors:		
A. DIRI	ECTORS		
Chairman	);		
Address:			
Vice Chai	irman:		
Address:			
-	DAVID DEDIAN OPECIDENTICE		
Director:	DAVID DERIAN, PRESIDENT/CEO		
Address:	2118 LAKE AVENUE		
	RICHMOND, VA 23230		
Director:			
Address:			
B. OFF			
President:	DAVID DERIAN, PRESIDENT/CEO		
Address:	2118 LAKE AVENUE	27 - 27 - 27	
	RICHMOND, VA 23230		
Vice Pres	ident:	23	- : .`. <u>.</u>
		<u></u>	
		<u>ල</u>	
Secretary:		4-	
Address:			
Treasurer:	:		
Address:		<u></u> .	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.	ors.	<u></u>
The offic are true a a third de	Signature of Director or Officer per or director signing this document (and who is listed in number 11 above) affirms that the facts stated that he or she is aware that false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S. ID DERIAN, PRESIDENT/CEO		

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

## Commonwealth of Hirginia



### State Corporation Commission

CERTIFICATE OF GOOD STANDING

### I Certify the Following from the Records of the Commission:

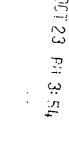
That Botanaway, Inc. is duly incorporated under the law of the Commonwealth of Virginia;

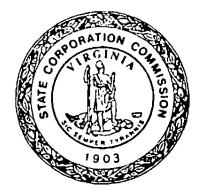
That the date of its incorporation is May 22, 2017;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.  $\sim$ 

Nothing more is hereby certified.





Signed and Sealed at Richmond on this Date: October 18, 2019

Joel H. Peck, Clerk of the Commission

CISECOM

Document Control Number: 1910186439