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Division of Corporations

## Florida Department of State Division of Corporations

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Division of Corporations

Fax Number : (850)617-6383

from:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : I20080000045 Phone : (302)645-7400 Fax Number : (302)645-1280

試Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* devonriewisi@gmail.com

Email Address:

Electronic Filing Menu

## FOREIGN PROFIT/NONPROFIT CORPORATION Fairway Exchange Inc.

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Corporate Filing Menu

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Help

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## 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.

| (If name unavaila  | ble in Florida, enter alternate corporate name                 | adopted for the purpose of transacting business in       | ı Florida   |  |
|--|--|--|-------------|--|
| Delaware   | 3.   | 99-3543074   |             |  |
| (State or country under the law of which it is incorporated) |  | (FEI number, if applicable)                              |             |  |
| (Date of incorporation)                                      |  | (Date of duration, if other than perpetual)              |             |  |
| vame and stree   | (Current mailir<br>t address of Florida registered agent: (P.C | ng address, if different)  D. Box <u>NOT</u> acceptable) |             |  |
| -dirio dijo <u>atroo</u>                                     | Devon Lewis  | 1.0  |             |  |
| Name:  |  |  |             |  |
| Name:  | 9934 Lake Louise Dr  |  | 20.         |  |
| Name:  | 9934 Lake Louise Dr  | Florida 34786  | 2024 راد    |  |
|  | 9934 Lake Louise Dr  | , Florida 34786 (Zip code)                               | 2024 JUN 28 |  |

10. 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.

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors (up to six (6) total):

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| A. DIRECTORS                          |  |  | ((()                                    |                            |
|---------------------------------------|--|--|---|----------------------------|
| □ Chairman                            | Name: Devon Lewis  | □ Chairman                                   | Name:                                   |                            |
| ⊡Vice Chairman                        | 9934 Lake Louise Dr<br>Address:  | □Vice Chairman                               | Address:                                |                            |
| Director                              | WINDERMERE, Florida, 34786   | Director                                     | *************************************** |                            |
| □President                            |  | ⊡President                                   |   |                            |
| □Vice President                       |  | □Vice President                              |   |                            |
| □ Secretary                           | Treasurer  | □Secretary                                   |   | □Treasurer                 |
| CEO CEO                               | Other  | □Other                                       |   | □Other                     |
|                                       |  |  |   |                            |
| Chairman                              | Name:  | □ Chairman                                   | Name:                                   |                            |
| □ Vice Chairman                       | Address:   | ☐Vice Chairman                               | Address:                                |                            |
| Director                              | <del></del>  | □Director                                    |   |                            |
| President                             |  | □President                                   |   |                            |
| □Vice President                       | ***************************************  | ©Vice President                              |   |                            |
| □ Secretary                           | Treasurer  | DSccretary                                   |   | □Treasurer                 |
| □Other                                | □ Other  | □Other                                       |   | □Other                     |
|                                       |  |  |   |                            |
| □Chairman                             | Name:  | □Chairman                                    | Name:                                   |                            |
| □Vice Chairman                        | Address:   | □Vice Chairman                               | Address:                                |                            |
| Director                              |  | □Director                                    |   |                            |
| - □President                          |  | □Presiden:                                   |   |                            |
| □Vice President                       |  | □Vice President                              |   |                            |
| □ Secretary                           | □Treasurer   | Secretary                                    |   | □Treasurer                 |
| □Other                                | Other  | Other  |   | □Other                     |
| Important Notice: Individuals, pay be | Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department | hment will be image<br>it of State Annual Re | d for reporting peport form.            | nurposes only. Non-indexed |

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.

Signature of Director or Officer

Devon Lewis, CEO

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

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FAIRWAY EXCHANGE 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 TWENTY-EIGHTH DAY OF JUNE, A.D.

2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FAIRWAY EXCHANGE INC." WAS INCORPORATED ON THE TWELFTH DAY OF JUNE, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203824139

Date: 06-28-24