

F760000001224

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

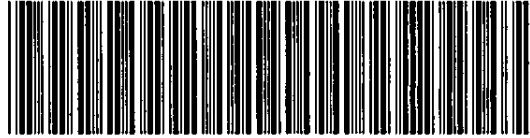
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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UNIT

3/16/16 DS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ToMarket Global, 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:

Steven L Relis CPA

Name of Person	
Koutoulas & Relis LLC	
Firm/Company	
1776 N Pine Island Road Ste 316	
Address	
Plantation, FL 33322	
City/State and Zip code	
info@krepas.us	
E-mail address: (to be used for future annual report notification)	

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16 MAR 14 PM 9:49
SECRETARY OF STATE

For further information concerning this matter, please call:

Steven L Relis CPA 954 332-1345
_____ at (_____) _____
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$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**

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.

1. ToMarket Global, 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)

2. Delaware 3. 47-5254559
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10-02-2015 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 02-01-2016
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1141 Holland Drive Suite 23, Boca Raton FL 33487
(Principal office address)

(Current mailing address, if different)

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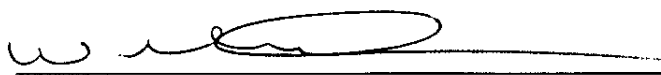
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: William Lapis

Office Address: 1141 Holland Drive Ste 23
Boca Raton, Florida 33487
(City) (Zip code)

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 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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Michael Raskin _____

Address: 1141 Holland Drive Ste 23 _____

Boca Raton, FL 33487 _____

Vice President: William Lapis _____

Address: 1141 Holland Drive _____

Boca Raton, FL 33487 _____

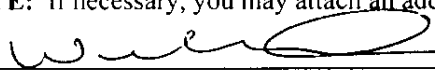
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, 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. William Lapis, Vice President _____

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

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Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOMARKET GLOBAL, 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 SECOND DAY OF MARCH, A.D. 2016.

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SECRETARY OF STATE
DELAWARE




Jeffrey W. Bullock, Secretary of State

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SR# 20160675849

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201800748

Date: 03-02-16