

F100000004149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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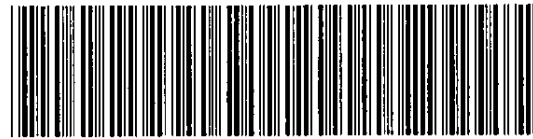
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
10 SEP 16 AM 10:45
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR
SEP 16 2010
EXAMINER

FILED
10 SEP 16 PM 2:15
SECRETARY OF STATE
DIVISION OF CORPORATIONS



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 510323 4307439

AUTHORIZATION :

COST LIMIT : \$ 70.00

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
10 SEP 16 PM 2:51

ORDER DATE : September 15, 2010

ORDER TIME : 9:53 AM

ORDER NO. : 510323-020

CUSTOMER NO: 4307439

FOREIGN FILINGS

NAME: CAPITAL MARKETS HOLDINGS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER: _____

File 2nd

**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.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
200 SEP 16 PM 2:15

1. Capital Markets Holdings, 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

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

3.

(FEI number, if applicable)

4. September 15, 2010

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

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

7. 814 A1A North, Suite 303, Ponte Vedra Beach, FL 32082-3270

(Principal office address)

814 A1A North, Suite 303, Ponte Vedra Beach, FL 32082-3270

(Current mailing address)

8. any lawful purpose(s) for which corporations may be organized under the General Corp. Law of DE

(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)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

, Florida 32301

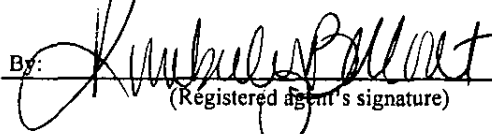
(Zip code)

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.

Corporation Service Company

By:



(Registered agent's signature)

**Kimberly B. Moret
as its 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. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Tom Millon

Address: 814 A1A North, Suite 303, Ponte Vedra Beach, FL 32082-3270

Vice Chairman: _____

Address: _____

Director: Jeffrey Harry

Address: 814 A1A North, Suite 303, Ponte Vedra Beach, FL 32082-3270

Director: _____

Address: _____

B. OFFICERS

President: Tom Millon

Address: 814 A1A North, Suite 303, Ponte Vedra Beach, FL 32082-3270

Vice President: Jeffrey Harry

Address: 814 A1A North, Suite 303, Ponte Vedra Beach, FL 32082-3270

814 A1A North, Suite 303, Ponte Vedra Beach, FL 32082-3270

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Tom Millon, President and Chief Executive Officer of Capital Markets Holdings, Inc.

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CAPITAL MARKETS HOLDINGS, 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 SIXTEENTH DAY OF SEPTEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAPITAL MARKETS HOLDINGS, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF SEPTEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

4872139 8300

100910910

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8230156

DATE: 09-16-10