FROM:



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000267578 3)))



H100002875783ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : FLORIDA FILING & SEARCH SERVICES

Account Number : I2000000189

: (850)216-0457

Fax Number

: (850)216-0460

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION TOV Capital Markets, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

	_	
FAX	NIO .	
	INL	

Dec. 14 2010 04:13AM P2/4

H 1 0 0 C 0 2 6 7 5 7 8

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 unavails	able in Florida, enter alternate corporate r	SCT RE	adopted for the purpose of transacting business in	Fiorida)
•	2010 (1. 1 201 mm, 401 mm, 101 mm, 402 harrier -			
Oelaware (State or country	under the law of which it is incorporated	- 3·.	(FEI number, if applicable)	
. May 3, 20			Perpetual	
	of incorporation)	,	(Duration: Year corp. will cease to exist or "perp	octual")
s. N/A				
			n Plorida, if prior to registration) 502, F.S., to determine penalty liability)	
, 1000 Bric	kell Ave., Unit 11E Mia	_		
7. 1000 Bill	(Principal offic	e add	ress)	
1000 Brid	kell Ave., Unit 11E M	iar	ni, FL 33131	
	(Current mallin			
Canadala	- Bushan-		_	
B. Securities	es Brokerage of corporation authorized in home state	or co	ountry to be carried out in state of Florida)	<u>.</u> 3
(Purpose(i	i) of corporation authorized in home state		ountry to be carried out in state of Florida)	
(Purpose(i	 of corporation authorized in home state et address of Florida registered agent: 	(P.C	D. Box NOT acceptable)	る。民間
(Purpose(i	i) of corporation authorized in home state	(P.C	D. Box NOT acceptable)	6 EC 13
(Purpose(i 9. Name and street Name:	 of corporation authorized in home state et address of Florida registered agent: 	(P.C ns,	D. Box NOT acceptable)	BE 13 M
(Purpose(i 9. Name and street Name:	et address of Florida registered agent: Registered Agent Solutio 155 Office Plaza Dr. Su	(P.C ns. ite	D. Box NOT acceptable) Inc. A	1000
(Purpose(i 9. Name and street Name:	et address of Florida registered agent: Registered Agent Solutio 155 Office Plaza Dr. Su	(P.C ns. ite	D. Box NOT acceptable)	
(Purpose(i P. Name and street Name: Office Address:	et address of Florida registered agent: Registered Agent Solutio 155 Office Plaza Dr. Su Tallahassee (City)	(P.C ns. ite	D. Box NOT acceptable) Inc. A	1000
(Purpose): 9. Name and stree Name: Office Address: 10. Registered a Having been nam	et address of Florida registered agent: Registered Agent Solutio 155 Office Plaza Dr. Su Tallahassee (City) gent's acceptance: and us registered agent and to accept	(P.C	D. Box NOT acceptable) Inc. A , Florida 32301 (Zip code) Ice of process for the above stated corporation	9 52 at the place
(Purpose): Name and stree Name: Office Address: 10, Registered a Having been nam designated in this	et address of Florida registered agent: Registered Agent Solutio 155 Office Plaza Dr. Su Tallahassee (City) gent's acceptance: and us registered agent and to accept application, I hereby accept the app	(P.C	D. Box NOT acceptable) Inc. A , Florida 32301 (Zip code) Ice of process for the above stated corporation ment as registered agent and agree to act in the	at the place
(Purpose): Name and stree Name: Office Address: 10, Registered a Having been nam designated in this further agree to c	et address of Florida registered agent: Registered Agent Solutio 155 Office Plaza Dr. Su Tallahassee (City) gent's acceptance: and us registered agent and to accept application, I hereby accept the app	(P.C	Inc. A	at the place
(Purpose): 9. Name and stree Name: Office Address: 10. Registered a Having been nam designated in this further agree to c	et address of Florida registered agent: Registered Agent Solutio 155 Office Plaza Dr. Su Tallahassee (City) gent's acceptance: and us registered agent and to accept application, I hereby accept the apply with the provisions of all states	(P.C	Inc. A	at the place
(Purpose): 9. Name and stree Name: Office Address: 10. Registered a Having been nam designated in this further agree to c	et address of Florida registered agent: Registered Agent Solutio 155 Office Plaza Dr. Su Tallahassee (City) gent's acceptance: and us registered agent and to accept application, I hereby accept the apply with the provisions of all states	(P.C	Inc. A	at the place

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.

H 1 0 0 0 0 2 6 7 5 7 8

12. Names and business addresses of officers and/or directors:			
A. DIRECTORS	•		
Chairman: Fernando Heller			
Address: TOV Corretore de Cambio, Títulos e Valores Rua Joaquim Ant	tunes, 246	Sao Paolo,	Brazil
		······································	
/ise Chairman:			
Address:			
irector.			
ddress:			
		······································	
restor:	;		
ddress:		芒数	<u>る</u>
CAMPACIENCE	·		EC
OFFICERS Stafen Burntin			
esident Stefan Burstin		100	
toress: TOV Corretore de Cambio, Titulos e Valores Rua Joaquim Ani	tunes, 246		,
			9. 52
ce President			- 2
idress:			
cretary: Valestan Ribeiro	<u> </u>		
idres: TOV Corretora de Cambio, Titulos e Valores Rua Joaquim Ant	unes, 246	Sao Paolo,	Brazil
casurer:			
•		·····	
Idress:			
OTE: If necessary, you may attach an addendum to the orbitcation disting addition	ial officers an	id/or directors.	
Signature of Director or Officer			
the officer or director signing this document (and who is listed in number 12 above) true and that he or she is aware that false information submitted in a document to ird degree felony as provided for in s.817.155, F.S.	affirms that the Department	he facts stated ent of State con	berein stirutes a
57-PAN BURSTIN President			
(Typed or printed name and capacity of person signing appli	cation)	······································	

Hi0000267578

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOV CAPITAL MARKETS, 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 TRIRTEENTH DAY OF DECEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TOV CAPITAL MARKETS, INC." WAS INCORPORATED ON THE THIRD DAY OF MAY, A.D. 2010.

AND I DO REREBY FURTHER CERTIFY THAT THE FRANCRISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED M 9 52

ARTONON REAN

101180228

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

AUTHENTY CATION: 8422109

DATE: 12-13-10