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(Requestor's Name)

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(City/State/Zip/Phone #)

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MAIL

\_\_\_\_\_  
(Business Entity Name)

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(Document Number)

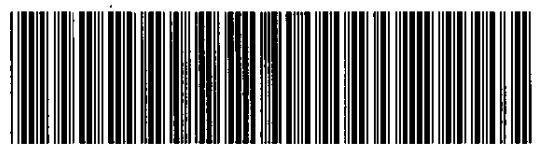
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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W10000055341



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MD 2/21

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** COVI GROUP LIMITED

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:

JOSE MIGUEL VILLEGAS

Name of Person

COVI GROUP LIMITED

Firm/Company

175SW 7 STREET SUITE 1912

Address

MIAMI FLORIDA 33130

City/State and Zip code

jose.villegas@mac.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE M VILLEGAS

Name of Person

at ( 786 ) 2474298

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

New Filing 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 29, 2010

JOSE MIGUEL VILLEGAS  
175 SW 7 STREET  
SUITE 1912  
MIAMI, FL 33130

SUBJECT: COVI GROUP LIMITED  
Ref. Number: W10000055341

We have received your document for COVI GROUP LIMITED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 810A00027695

**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. COVI GROUP LIMITED 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. BRITISH VIRGIN ISLANDS

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

3. N/A

(FEI number, if applicable)

4. AUGUST 5 2010

(Date of incorporation)

5. PERPETUAL

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

6. \_\_\_\_\_

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

7. PO BOX 146 WICKHAMS CAY ROAD TOWN TORTOLA BVI

(Principal office address)

175 SW 7 STREET SUITE 1912 MIAMI FLORIDA 33130

(Current mailing address)

8. POSSIBILITY OF DOING BUSINESS

(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: JOSE MIGUEL VILLEGAS

Office Address: 175 SW 7 STREET SUITE 1912

MIAMI

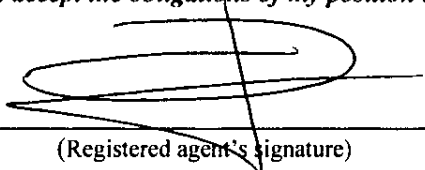
(City)

, Florida 33130

(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.*



(Registered agent's signature)

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.

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STATE  
SECRETARY  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: JOSE MIGUEL VILLEGAS

Address: 1162 98TH STREET BAY HARBOR ISLAND, FL 33154

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

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

The officer or director signing this document (and who is listed in number 12 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.

14. \_\_\_\_\_

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## APOSTILLE

(Convention de La Haye du 5 octobre, 1961)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Country : British Virgin Islands
- This public document
2. Has been signed by : Lydia Cline Parsons
3. Acting in the capacity of : Officer of the Financial Services Commission
4. Bears the Seal/Stamp of : Registrar of Corporate Affairs


### CERTIFIED

5. At : Road Town, Tortola
6. On : The 13<sup>th</sup> day of January, 2011
7. By : "REGISTRAR-GENERAL"
8. No. : R 6 - 56295

9. Seal/Stamp



10. Signature



**TERRITORY OF THE BRITISH VIRGIN ISLANDS**  
**BVI BUSINESS COMPANIES ACT, 2004**

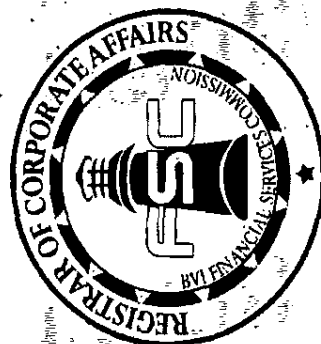
**CERTIFICATE OF INCORPORATION**  
**(SECTION 7)**

The REGISTRAR of CORPORATE AFFAIRS, of the British Virgin Islands HEREBY CERTIFIES, that pursuant to the BVI Business Companies Act, 2004, all the requirements of the Act in respect of incorporation having been complied with,

**COVI GROUP LIMITED**

**BVI COMPANY NUMBER: 1598852**

is incorporated in the **BRITISH VIRGIN ISLANDS** as a **BVI BUSINESS COMPANY**, this 5th day of August, 2010.



**CERTIFIED A TRUE COPY BY THE REGISTRAR OF CORPORATE AFFAIRS**

*[Signature]*  
for REGISTRAR OF CORPORATE AFFAIRS

SGD

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5th day of August, 2010

*[Signature]*  
for REGISTRAR OF CORPORATE AFFAIRS

7th day of January, 2011

11 FEB 14 PM 4:05

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