## F16000003700

· · · · · · · · · · · · · · · · · · ·		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
	<del>-</del>	
Special Instructions to	Filing Officer:	

Office Use Only



600288572946

N. HARRIS



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 256419 8104473

AUTHORIZATION : Smell of a

COST LIMIT : \$\mathcal{C}^2\dot{0}\_000

ORDER DATE: August 16, 2016

ORDER TIME : 12:58 PM

ORDER NO. : 256419-001

CUSTOMER NO: 8104473

#### FOREIGN FILINGS

NAME: TCA CAPITAL MARKETS SERVICES

GROUP CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

### COVER LETTER

	Filing Section of Con						
SUBJECT:	TCA Cap	ital Markets Ser	vices Group	Corp.			
Bobyte 1.		Name	of corporati	on - must i	nclude suffix		
Dear Sir or M	adam:						
"Certificate of	Existence	on by Foreign C e," or "Certificat a corporation to	e of Good St	landing" aı	nd check are sul		
Please return a	all corresp	ondence concer	ning this mat	ter to the f	ollowing:		
Alyce Schreib	er						
			Name o	of Person			
TCA Fund Ma	nagemen	t Group Corp.		<del></del>	_		
			Firm/Co	ompany			
19950 West C	Country Cl	ub Drive, Suite 1	01				
			Ade	dress			
Aventura, FL	33180				<u></u>		
			City/State	and Zip co	ode		
aschreiber@t	caglobaltu		or (to be use	d for future	e annual report	notification	
For further inf	formation :	concerning this	•		o annuar report	постолнону	
Alyce Schreiber at (786		a Code & Daytime Telephone Number					
Name	of Persor	1	Arc	a Code & 1	Daytime Telepl	ione Number	<del></del>
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:		MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
🗖 \$70.00 Fili	ing Fee	S78.75 Filis Certificate			Filing Fee & ed Copy	□ \$87.50 Fi Certifica Certified	te of Status &

## 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 nam	ne adopted for the purpose of transac	ting business in Florida)		
Delaware		81-3399074			
(State or countr	y under the law of which it is incorporated)	(FEI number, if	(FEI number, if applicable)		
07-25-2016		Perpetual			
(Date	of incorporation)	5. (Duration: Year corp. will cease	(Duration: Year corp. will cease to exist or "perpetual")		
		s in Florida, if prior to registration) .1502, F.S., to determine penalty liab	bility)		
9950 W. COU	NTRY CLUB DR,1ST FL, AVENTURA, F	FL , 33180, US			
	(Principal office ad	ddress)			
9950 W. COU	NTRY CLUB DR,1ST FL, AVENTURA, (	FL., 33180, US			
	(Current mailing ac	ddress)			
Name and stree	et address of Florida registered agent: (F	P.O. Box NOT acceptable)			
Name:	Corporation Service Company				
	1201 Hays Street				
ice Address:	Tallahaanaa	20201			
ice Address:	Tallahassee	32301 , Florida	9:5		
ice Address:	Tallahassee (City)		73.05 73.05 73.05 73.05 73.05 73.05 73.05 73.05 73.05 74.05 75 75 75 75 75 75 75 75 75 75 75 75 75		
		, Florida	월 <u>급</u> 01		
Registered ago	(City) ent's acceptance: ed as registered agent and to accept ser	, Florida(Zip code)  rvice of process for the above sta	स्कृति का होता की ated corporation at the pla		
Registered ago ving been nam gnated in this	(City) ent's acceptance: ed as registered agent and to accept ser application, I hereby accept the appoin	, Florida (Zip code)  rvice of process for the above statement as registered agent and a	nted corporation at the pla agree to act in this capacit		
Registered ago ing been nam gnated in this her agree to c	(City) ent's acceptance: ed as registered agent and to accept ser	, Florida, Zip code)  rvice of process for the above stantanent as registered agent and a s relative to the proper and comp	ated corporation at the pla agree to act in this capacit plete performance of my		
ving been nam ignated in this ther agree to c ies, and I am f	(City) ent's acceptance: ed as registered agent and to accept ser application, I hereby accept the appoin omply with the provisions of all statutes	, Florida, Zip code)  rvice of process for the above stantanent as registered agent and a s relative to the proper and comp	ated corporation at the pla agree to act in this capacit plete performance of my		

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. DIRE	CTORS			
Chairman:	Robert Press			
	19950 West Country Club Drive, Suite 101, Aventura, FL 33180			
Addiess				<del></del>
Vice Chair	nan:			
Address:				
_				
Director: _				
Address:				
_				
Director:				
Additss				
B. OFFIC	TERS			
	Robert Press			
President:	9950 West Country Club Drive, Suite 101, Aventura, FL 33180			
Address: _				
-		<del></del>		
Vice Presid	ent:	7.50	*****	** ***
Address: _		1 1	73	
		**.	· -/	· 
Secretary:	Robert Press	7. T.	- 1	/ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Address:	9950 West Country Club Drive, Suite 101, Aventura, FL 33180	HALI TVI	S č	Sec. 1
Treasurer:	Robert Press	27	OT.	
	9950 West Country Club Drive, Suite 101, Aventura, FL 33180		••	
_				
	necessary, you may attach an addendum to the application listing additional of	ncers and/or dir	ectors,	
12	Signature of Director or Officer			
	r or director signing this document (and who is listed in number 12 above) affire			
	d that he or she is aware that false information submitted in a document to the I ree felony as provided for in s.817.155, F.S.	Department of Si	ate coi	istitutes
•	1 Press Kulut Ken Ka	Kut V	Ni	^
	(Typed or printed name and capacity of person signing application	n)		

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TCA CAPITAL MARKETS SERVICES GROUP

CORP." 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

AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TCA CAPITAL MARKETS SERVICES GROUP CORP." WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF JULY, A.D. 2016.

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



Authentication: 202836785

Date: 08-16-16

6106109 8300 SR# 20165388837