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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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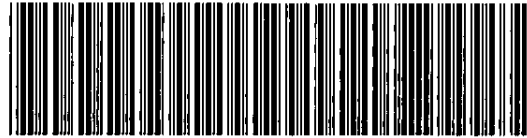
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

NOV 16 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EAGLE MATRIX, LLLP

Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

DENNIS L. BLACKBURN

Contact Person

BLACKBURN & COMPANY, LC

Firm/Company

5150 BELFORT RD. SO., BLDG 500

Address

JACKSONVILLE, FL 32256

City, State and Zip Code

dlb@blackburnco.com

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

For further information concerning this matter, please call:

DENNIS BLACKBURN

Name of Contact Person

at (904) 296-7713

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> \$1,000.00 Filing Fees
(\$965 Filing Fee and
\$35 Registered Agent
Fee) | <input type="checkbox"/> \$1,008.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$1,052.50 Filing Fees
and Certified Copy | <input type="checkbox"/> \$1,061.25 Filing Fees,
Certified Copy, and
Certificate of Status |
|--|---|---|--|

STREET ADDRESS:

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

MAILING ADDRESS:

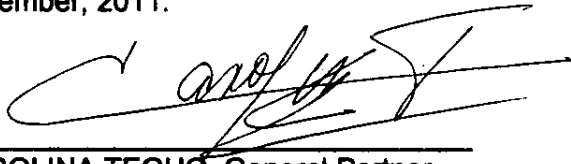
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

CR2E030 (01/06)

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. Name of Limited Liability Limited Partnership: EAGLE MATRIX, LLLP
2. The street address and mailing address of the limited liability limited partnership shall be: 6144 SAN JOSE BOULEVARD WEST, JACKSONVILLE FL 32217.
3. The name and street address of the initial registered agent is Blackburn & Company, L.C., 5150 Belfort Rd. Bldg. 500, Jacksonville, FL 32256.
4. The limited partnership hereby elects to be a limited liability limited partnership.
5. The sole general partner shall be Carolina Tegho, whose address is 6144 San Jose Blvd. W., Jacksonville, FL 32217.
6. The effective date shall be the date of the filing of this certificate of limited liability limited partnership.

I submit this document and affirm that the facts stated herein are true. I am aware that any 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. IN WITNESS WHEREOF, the undersigned, who is the sole general partner, has executed the foregoing Certificate of Limited Partnership for Limited Liability Limited Partnership as of the 10th day of November, 2011.



CAROLINA TEGHO, General Partner

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

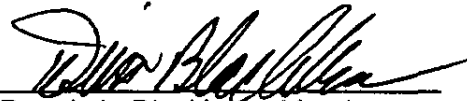
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**ACCEPTANCE OF DESIGNATION
AS REGISTERED AGENT**

Having been named as registered agent and to accept service of process for EAGLE MATRIX, LLLP at the place designated in the Certificate of Limited Partnership for Limited Liability Limited Partnership, BLACKBURN & COMPANY, L.C. hereby accepts the appointment as registered agent and agrees to act in this capacity. BLACKBURN & COMPANY, L.C. further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and BLACKBURN & COMPANY, L.C. is familiar with and accepts the obligations of his position as registered agent.

BLACKBURN & COMPANY, L.C.

A handwritten signature in black ink, appearing to read "Dennis L. Blackburn", written over a horizontal line.

Dennis L. Blackburn, Member

Date: November 9, 2011

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA