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CLERK OF STATE
TALLAHASSEE, FLORIDA

B. McKnight FEB 24 2009

W09-6894

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: MATRIX MANAGEMENT, INC.

(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," 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:

AMY HUNTER

(Name of Person)

ACORN CORPORATE SERVICES

(Firm/Company)

3225 MCLEOD DRIVE #110

(Address)

LAS VEGAS, NV 89121

(City/State and Zip code)

For further information concerning this matter, please call:

AMY HUNTER

(Name of Person)

at (800) 266-1296

(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

February 12, 2009

AMY HUNTER
ACORN CORPORATE SERVICES
3225 MCLEOD DRIVE #110
LAS VEGAS, NV 89121

SUBJECT: MATRIX MANAGEMENT NV, INC.
Ref. Number: W09000006894

We have received your document for MATRIX MANAGEMENT NV, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6931.

Becky McKnight
Regulatory Specialist II
New Filing Section

Letter Number: 609A00005064

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. MATRIX MANAGEMENT, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

MATRIX MANAGEMENT NV, INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEVADA 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2/6/1998 5. PERPETUAL
(Date of incorporation) (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. 3225 MCLEOD DRIVE, SUITE 100, LAS VEGAS, NV 89121
(Principal office address)

3225 MCLEOD DRIVE, SUITE 100, LAS VEGAS, NV 89121
(Current mailing address)

8. MANAGEMENT AND RESEARCH
(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: BUSINESS FILINGS INCORPORATED

Office Address: 1203 GOVERNORS SQUARE BLVD SUITE 101
TALLAHASSEE, Florida 32301
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Mary Jo Spalinger, Asst. Sec. for Business Filings Incorporated
(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: A.T. MATHISAddress: 3225 MCLEOD DRIVE, SUITE 100, LAS VEGAS, NV 89121

Director: _____

Address: _____

B. OFFICERSPresident: A.T. MATHISAddress: 3225 MCLEOD DRIVE, SUITE 100, LAS VEGAS, NV 89121Vice President: A.T. MATHISAddress: 3225 MCLEOD DRIVE, SUITE 100, LAS VEGAS, NV 89121Secretary: A.T. MATHISAddress: 3225 MCLEOD DRIVE, SUITE 100, LAS VEGAS, NV 89121Treasurer: A.T. MATHISAddress: 3225 MCLEOD DRIVE, SUITE 100, LAS VEGAS, NV 89121**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. A.T. MATHIS - PRESIDENT

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

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CLERK OF DISTRICT COURT
TALLAHASSEE FLORIDA

SECRETARY OF STATE




CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **MATRIX MANAGEMENT, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 6, 1998, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 18, 2009.




ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20090218-1257
You may verify this electronic certificate
online at <http://www.nvsos.gov/>

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA