

FD900000704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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AFF. David D
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Matrix Management NV, Inc.
Name of Corporation

DOCUMENT NUMBER: F09000000704

The enclosed *Affidavit by Foreign Corporation to Change/Add Officer(s) and/or Director(s)* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tony M. Palmer
Name of Contact Person

Matrix Mgt. NV
Firm/Company

3015 SW Pine Island Rd #113-441
Address

Cape Coral, FL 33991
City/State and Zip Code

tpalmer.ita@earthlink.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tony M. Palmer at (702) 568-1445
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for the following amount:

- ☒ \$35.00 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S)
AND/OR DIRECTOR(S)**

(Note: Applicable only during the first calendar year of qualification)

1. The name of the foreign corporation as it appears on the records of the Florida Department of State is:
Matrix Management NV, Inc.
2. This entity was authorized to transact business in Florida on 02/19/2009 and its Florida document number is F09000000704
3. This corporation was formed under the laws of Nevada
4. The name and address of each officer and/or director is as follows:

Title:

Name and Address

President

Maureen C Ross

3015 SW Pine Island Rd #113-441

Cape Coral, FL 33991

Secretary

Tony M. Palmer

3015 SW Pine Island Rd #113-441

Cape Coral, FL 33991

Treasurer

Tony M. Palmer

3015 SW Pine Island Rd #113-441

Cape Coral, FL 33991

(Attach additional pages if necessary) (0) (5)

Tony M. Palmer
Signature of an officer or director

Secretary
Title of person signing

Tony M Palmer
Typed or printed name of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to:
Division of Corporations • PO Box 6327 • Tallahassee, FL 32314