# F11000000237

(Requ	uestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	s of Status		
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ZOII JAN 19 AM II: 09
SECRETARY OF STATE
TALLAHASSEF, FINES

J. Shivers 1 JAN 20 2011

### COVER LETTER

	CO FRANCE IN TELL	
TO: New Filing Section Division of Corporations	-	
SUBJECT: MATRIX SOLUTION	NS, INC.	
(Nar	ne of corporation - must include suffix)	
Dear Sir or Madam		
	Corporation for Authorization to Transact Business in a submitted to register the above referenced foreign co	
Please return all confespondence concen KATIE STILLING	mag the matter to the following	
	(Name of Person)	
MATRIX SOLUTIONS, INC	•	
	(Film/Company)	
114 SOUTH MAIN STREET	, SUITE 201	
	(Address),	
MT. AIRY, MD 21771	. • •	∑ <u>.</u> 23
	(City/State and Zip code)	JAN 19
For further information concerning this	matter, please call	alams "
BRIAN ELWELL, CPA	at (_772 ) 231-6902	
(Name of Person)	(Area Code & Daytime Telephone Number)	AM II: 09  OF SINGE
	أماق ممم المطهور الوسطور المعمدة المام الم	. <del>.</del>

#### 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** PO Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following amount

70 00 Filing Fcc

□\$78 75 Filing Fee & Certificate of Status ☐ \$78 75 Filing Fee & Certified Copy

S87 50 Filing Fee, Certificate of Status & Certified Copy

#### 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 4 FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORID 4

·	SOLUTIONS, INC			·
	corporation, must include "I Corp " "Inc " "Co " or 'Corp		COMPANY" CORPORATION,'	
Matr	ix. Solutions	Southeast, =	nc,	
(If name unavail	lable in Florida, enter alterni	ate corporate name ad	opted for the purpose of transacting busi	ness in Florida)
, MARYLAN	D	3	52-2283043	
(State or country	under the law of which it is	incorporated)	(FEI number, it applicable	·)
SEPTEMB	ER 28, 2000	5	N/A	
	of incorporation)		N/A Duration Year corp will cease to exist	or "perpetual")
			lorida, if prior to registration) , FS , to determine penalty liability)	
114 SOU	TH MAIN STREET,	SUITE 201	MT. AIRY, MD 21771	
-	(F	rincipal office address	5)	
114 SOU	TH MAIN STREET	, SUITE 201	MT. AIRY, MD 21771	
	(C	urrent mailing address	<b>5</b> }	zi. 2
RESALE	OF TECHNICAL P	RODUCTS		2011 JAN 19 SEGRUTARY
(Purpose(s	of corporation authorized	in home state or count	try to be carried out in state of Florida)	N I
Name and stree	et address of Florida regis	tered agent , (PO E	Box NOT acceptable)	<u> </u>
Name	BRIAN ELWELL,	CPA	_	AM II: O
Office Address	2800 OCEAN DI	RIVE		
	VERO BEACH	M 4 V	, Plorida` <u>32963</u>	\$> <del></del>
	(City	<i>y</i> )	(Zip code)	

#### 10 Registered agent's acceptance.

Having been numed 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.

<sup>11</sup> Attached is a certificate of existence duly authenticated, not incre 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

<sup>12</sup> Names and business addresses of officers and/or dijectors

<del>-</del>			
PECETVED 11 '29/ I Nov 29 10 02 32p Matrix Solutions Inc	2010 14 50 7721214099	F11ETZ HUTT⊨LL 3018290691	ELIELL p 7
• • •			
A. DIRECTORS			
Chairman <u>Kathleen W S</u>	Hilling		
Address 404 Langbow Rd:			
Mt. Airy, MD 217	7/.		
Vice Chairman			
Address			
	}		
Director Brian M Weism	nan :		
Address 6167 Osprey Rid	ge Dr.		
	217711		
Director <u>Farl</u> W. Weism	ian '		
Address 14660 Viburnum			
Dayton MD 210	_		
	<u> </u>		
B. OFFICERS	1		
President Kathleen W. Sti	. •		<del></del>
- 1	1.		=
Mt. Airy, MD.	2/771		2
Vice President		SSE	9
Address		7	<u> </u>
		Arrest Arrest	

Viburnum

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors

Kothleen W. Stelling
(Signature of Director or Officer listed in number 12 of the application) Kathleen W. Stilling
(Typed or printed name and capacity of person signing application)

## STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT MATRIX SOLUTIONS INC, INCORPORATED SEPTEMBER 28, 2000, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS DECEMBER 08, 2010.

Paul B. Anderson Charter Division

Paul B. Under

SECRETARY OF STATE



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

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