

**A20000001066**

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION  
Matrix Design Group, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	05
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**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** MATRIX DESIGN GROUP, 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," or "Certificate of Good Standing" 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:

JILLIE A. CARVER  
Name of Person  
MATRIX DESIGN GROUP, INC.  
Firm/Company  
1601 BLAKE STREET, SUITE 200  
Address  
DENVER, COLORADO 80202  
City/State and Zip code  
jillie\_carver@matrixdesigngroup.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JILLIE CARVER at (303) 572-0200  
Name of Person 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

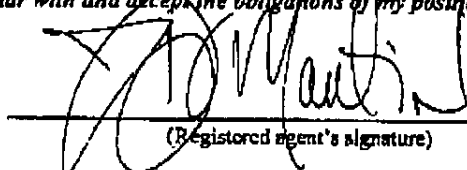
# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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 DESIGN GROUP, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. COLORADO 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 3 SEPT 1999 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. 2135 RESEARCH PKWY, COLORADO SPRINGS, COLORADO 80920-1070  
(Principal office address)
- SAME  
(Current mailing address)
8. CIVIL ENGINEERING, LAND PLANNING, & ENVIRONMENTAL SERVICES  
(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: CT CORPORATION SYSTEM  
Office Address: 1200 SOUTH PINE ISLAND ROAD  
PLANTATION, Florida 33324  
(City) (Zip code)

## 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.

  
(Registered agent's signature)

James D. Martin  
Asst. Vice President

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.

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

## A. DIRECTORS

Chairman: DAN SCHNEPP  
 Address: MATRIX DESIGN GROUP, INC.  
2435 RESEARCH PKWY, COLORADO SPRINGS, CO 80920-1070

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

## B. OFFICERS

President: JOHN BLANCHARD

Address: MATRIX DESIGN GROUP, INC.

1601 BLAKE STREET, SUITE 200, DENVER, CO 80202

CEO  
 Vice President: DAN SCHNEPP

Address: MATRIX DESIGN GROUP, INC.

2435 RESEARCH PKWY, COLORADO SPRINGS, CO 80920-1070

Secretary: JOHN BLANCHARD

Address: (SEE PREVIOUS)

Treasurer: DAN SCHNEPP

Address: (SEE PREVIOUS)

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

13. [Signature]

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. DAN SCHNEPP, CEO, MATRIX DESIGN GROUP, INC.

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

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 DEPARTMENT OF REVENUE

OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE**

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

**MATRIX DESIGN GROUP, INC.**

is a **Corporation** formed or registered on 09/03/1999 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19991166730.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/08/2012 that have been posted, and by documents delivered to this office electronically through 03/12/2012 @ 10:13:27.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 03/12/2012 @ 10:13:27 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8190826.



A handwritten signature in black ink, appearing to read 'Scott Gessler', is written over a horizontal line.

Secretary of State of the State of Colorado

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OFFICE OF THE SECRETARY OF STATE  
DIVISION OF CORPORATIONS

\*\*\*\*\*End of Certificate\*\*\*\*\*

*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."*