2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 10, 2008 8:00 am Secretary of State

				_ Secretary or State	
DOCUMENT # L07000056340 1. Entity Name MATRIX 301, LLC				01-10-2008 90021 008 ***138.75	
Principal Plac	a of Rusiness	Mailing Address		60000763	
Principal Place of Business 11705 BOYETTE ROAD, #424 RIVERVIEW, FL 33569		11705 BOYETTE ROAD, #424 RIVERVIEW, FL 33569			1
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01042008 Chg-LLC CR2E083 (12/06)	
City & Stat	е	City & State		4. FEI Number 26 - 04 03 65 3 Applied Fo Not Applied	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$5.00 Additional Fee Required	
	6. Name and Address of Current I	Registered Agent		7. Name and Address of New Registered Agent	
			Name		
LASMAN, JEFFREY M ESQ. C/O LASMAN LAW FIRM, P.A. 6152 DELANCEY STATION STREET, SUITE 205 RIVERVIEW, FL 33569		Street Addre	ess (P.O. Box Number is Not Acceptable)		
			City	FL Zip Code	
	named entity submits this statement for tions of registered agent	the purpose of changing its	registered office or regi	istered agent, or both, in the State of Florida. I am familiar with, and acc	ept
SIGNATURE SIGNATURE				1/7/07	
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	: Registered Agent signature req	juired when reinstating) DATE	
FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				Make check payable to	530
9.				Florida Department of State	Sm 33. Sty
	MANAGING MEMBER		10.	Florida Department of State	San 2000 Sty
TITLE	MANAGING MEMBER		10.		dition
TITLE NAME	· · · · · · · · · · · · · · · · · · ·	RS/MANAGERS	····	ADDITIONS/CHANGES	dition
	MGRM	RS/MANAGERS	TITLE	ADDITIONS/CHANGES	dition
NAME	MGRM EMES, BRETT L	RS/MANAGERS	TITLE NAME	ADDITIONS/CHANGES	dition
NAME STREET ADDRESS	MGRM EMES, BRETT L 11705 BOYETTE ROAD, #424	RS/MANAGERS	TITLE NAME STREET ADDRESS	ADDITIONS/CHANGES	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM EMES, BRETT L 11705 BOYETTE ROAD, #424 RIVERVIEW, FL 33569 MGRM BONNAU, IVAN R	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

☐ Delete

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

1/7/07

8/3-677-6655

☐ Change ☐ Addition