

LOT 000096672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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JUL 29 2008

EXAMINER



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Name-Sign

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SECRETARY OF STATE
DIVISION OF COR. ORATION
08 JUL 28 PM 4: 03

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MATRIX AIR LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KENN R KRIEJISH
(Name of Person)

MATRIX AIR LLC
(Firm/Company)

2150 White Wood Ct
(Address)

ORLANDO, FL 32837
(City/State and Zip Code)

For further information concerning this matter, please call:

Kenn R. KRIEJISH at (813) 253-9825
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 7, 2008

KENN R KRIEGISH
2150 WHITE WOOD CT
ORLANDO, FL 32837

SUBJECT: MATRIX AIR, LLC
Ref. Number: L07000096672

We have received your document for MATRIX AIR, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return 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) 245-6851.

Gina McLeod
Regulatory Specialist II

Letter Number: 208A00040003

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. Name of the limited liability company: MATRIX AIR LLC
- 2. (a) Principal office address of limited liability company: 2150 White Wood Ct
ORLANDO, FL 32837
(Note: MUST BE STREET ADDRESS)
- (b) Mailing address of limited liability company: _____
/
(Note: MAY BE POST OFFICE BOX)

3. Date of filing/registration in Florida _____ 4. Document number _____

- 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Agent: The Law Offices of Nick
Registered Office Address: 12000 N. DATE MADRID SPRING
TAMPA, FLORIDA 33618 Ste 110

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Agent: KEN R. KRIEGISH
NEW Registered Office Address: 2150 White Wood Ct
(MUST BE FLORIDA STREET ADDRESS) ORLANDO, FL 32837

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
(Signature of a member or authorized representative of a member)

Ken R. Kriegish
(Printed or typed name of signer)

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUL 28 PM 4:00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00