Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H100001096383)))



H100001096383ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Phone

Account Number : FCA000000023 : (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:\_

## FLORIDA LIMITED LIABILITY CO. FED/Matrix Design Group LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

J. BRYAN

MAY - 6 2010

**EXAMINER** 

ARTICLES OF OF	RGANIZATION	FOR FLORIDA LIMITED LIABILITY COMB
ARTICLE I - Name	e:	سر چ ر
The name of the Lin		apany is:
777	· "	
FED/Matrix Design Gro		,
(Must	i coa with the words "Lir	mited Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Add	ress:	•
The mailing address	and street address	of the principal office of the Limited Liability Comp
_		• •
Principal Office Ad	drevs:	Mailing Address:
255 County Road 555 S		255 County Road 555 S
Bartow, FL 33830		Bartow, P.C. 33830
ARTICLE III - Res	ipany cannot serve us its	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
(The Limited Liability Com		
(The Limited Liability Com- business entity with an act		s of the registered agent are:
(The Limited Liability Com- business entity with an act The name and the Fl		s of the registered agent are:
(The Limited Liability Com- business entity with an act The name and the Fl	orida street address	s of the registered agent are:
(The Limited Liability Combusiness entity with an act The name and the Fl	orida street address	m Name
(The Limited Liability Combusiness entity with an act The name and the Fl	orida street address C T Corporation Syste	m Name
(The Limited Liability Combusiness entity with an act The name and the Fl	orida street address C T Corporation Syste	s of the registered agent are:  m  Name  Road

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to camply with the provisions of all statutes relating 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.

By: Diene Stort, Aust. Secretary
Registered Agent's Signature (REQUIRED)

(CONTINUED)
Fage 1 of 2

Title:	Name and Address:
'MGR" = Manager	
'MGRM" = Managing Me	mber
MGRM	Matrix Architects Incorporated
	249 Wayne Avenue
•	Dayton, OH 45402
MGRM	The state of the s
40KW	Florida Engineering and Design, Inc.
	255 County Road 555 \$
	Bartow, FL 33830
.*	
•	
	· ·
,	
Use attachment if necessa	ry)
	er than the date of filing: (OPTION
EV: Effective date, if off ective date is listed, the d	ter than the date of filing: (OPTION ate must be specific and cannot be more than five business da
EV: Effective date, if off ective date is listed, the d	ter than the date of filing: (OPTION ate must be specific and cannot be more than five business da
EV: Effective date, if or ective date is listed, the di days after the date of Min	ter than the date of filing: (OPTION ate must be specific and cannot be more than five business date.)
EV: Effective date, if or ective date is listed, the di lays after the date of Min	ter than the date of filing: (OPTION ate must be specific and cannot be more than five business date.)
EV: Effective date, if ot	ter than the date of filing: (OPTION ate must be specific and cannot be more than five business date.)
EV: Effective date, if or ective date is listed, the di days after the date of Min	ter than the date of filing: (OPTION ate must be specific and cannot be more than five business date.)
EV: Effective date, if oth ective date is listed, the distance after the date of filing REQUIRED SIGNATURE	ter than the date of filing: (OPTION ate must be specific and cannot be more than five business date.)
EV: Effective date, if ortective date is listed, the distance of filing section of the date of filing second signature.  (In according to the date of the date of filing second s	That the date of filing:  The must be specific and cannot be more than five business day  The must be specific and cannot be specific and cannot be specific and cannot be specific and cannot
EV: Effective date, if or ective date is listed, the date is listed, the date of filing the date of filing the date of filing the date of filing the date of this does do this does do this does do	The than the date of filing:  A cannot be more than five business day  (C)  (C)  (C)  (C)  (C)  (C)  (C)  (C

Page 2 of 2

\$1.25.00 Filing Fee for Articles of Organization and Designation of Registered Agent
5 30.00 Certified Copy (Optional)
5 5.00 Certificate of Status (Optional)