

P030000079522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

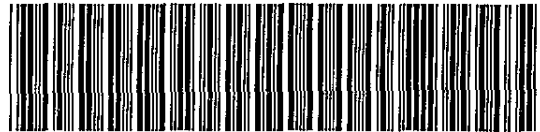
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03 JUL 17 PM 4:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: INNOVATIVE MATRIX SERVICES INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: SCOTT SEGAL  
Name (Printed or typed)

19503 PRESIDENTIAL WAY  
Address

MIAMI, FL 33179  
City, State & Zip

305-525-7676  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

INNOVATIVE MATRIX SERVICES INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

7481 W OAKLAND PARK BLVD  
SUITE  
LAUDERHILL, FL 33319

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

MANAGEMENT SERVICES

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

SCOTT D. SEGAL PRESIDENT  
19503 PRESIDENTIAL WAY  
MIAMI FL 33179

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

THOMAS M. O'ROURKE C.P.A.  
7481 W OAKLAND PARK BLVD  
SUITE  
LAUDERHILL FL 33319

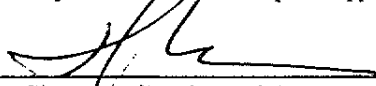
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

SCOTT SEGAL  
19503 PRESIDENTIAL WAY  
MIAMI FL 33179

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

 C.P.A.  
\_\_\_\_\_  
Signature/Registered Agent

7/2/03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

7/2/03  
\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA