

PD6 0001312/5

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

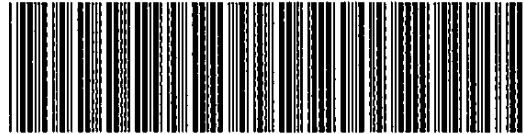
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE OCT 16 2006

COVER LETTER

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

SUBJECT: Matrix Technology Support Team, 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: Omar Izquierdo

Name (Printed or typed)

13825 Osprey Links Rd. - Apt. 257

Address

Orlando, FL 32837

City, State & Zip

407-451-2003

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:

Matrix Technology Support Team, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

13825 Osprey Links Rd. - Apt. 257
Orlando, FL 32837

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Computer and Network Consulting and Support

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):

Omar Izquierdo (President)
13825 Osprey Links Rd. - Apt. 257
Orlando, FL 32837
Manuel Suarez (Vice President)
4648 Aguila Place
Orlando, FL 32826

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Manuel Suarez
4648 Aguila Place
Orlando, FL 32826

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Omar Izquierdo
13825 Osprey Links Rd. - Apt. 257
Orlando, FL 32837

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



Signature/Registered Agent



Signature/Incorporator

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/7/06

Date

10/7/06

Date