# P2300000 6317

(Red	questor's Name)			
(Add	dress)			
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(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

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#### **COVER LETTER**

Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:

Matrix Success Network, Inc.

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

\$ 50.00 Certificate of Domestication

Articles of Incorporation and Certified Copy § 78.75

Total filing fee

\$128.75

**OPTIONAL:** 

Certificate of Status

\$ 8.75

From: Joycelyn Urech

Name (printed or typed)

1849 Kingwood Dr., Suite 105

Address

Kingwood, Texas 77339

City, State & Zip

(713) 291-3569

Daytime Telephone Number

kendra@matrixsuccessnetwork.com

E-mail address: (to be used for future annual report notification)

INHS53 (3/20)

## Articles of Domestication Foreign Corporation Domesticating to Florida

The undersigned, DNaII		Daimaso				
	(Name)	(Title)				
of Ma	atrix Success Network, Inc.	, a foreign				
	ration, in accordance with s. 607.11922, Floridation.	a Statutes, submit these Articles of				
1.	Then name of the domesticating corporation is Matrix Success Network					
	The state of the damestrating to provide	(Foreign Corporation)				
2.	The jurisdiction and date of its formation is	Massachuetts 03-02-2006				
3.	3. The name of the domesticated corporation is Matrix Success Network, Inc.					
4.	The jurisdiction of formation of the domestic	rated corporation is <b>Florida</b>				
5.	5. The domestication corporation is a foreign corporation and the domestication was approved in accordance with its organic law.					
6.	<ol> <li>Attached are Florida Articles of Incorporation to complete the domestication requirements pursuant to s.607.0202, F.S.</li> </ol>					
l certif	fy I am authorized to sign these Articles of Dor	nestication on behalf of the corporation.				
	Joycelyn W. (Author	Urech				
	O O (Author	ized Signature)				

THE WAY TO

### ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE	ir
Matrix Success Network, Inc.	
ARTICLE II PRINCIPAL OFFIC	CE
THE PRINCIPAL PLACE OF BUSINESS/MAILIN	
Principal Address 7901 4th St N, Ste 300	Mailing Address 7901 4th St. N, Ste 300
St. Petersburg, FL 33702	St. Petersburg, FL 33702
ARTICLE III PURPOSE	
THE PURPOSE FOR WHICH THE CORPORAT.	ION IS ORGANIZED: panized is for the transaction of any and all lawful purposes for
which a corporation may be organized a unc	
	AGENT AND STREET ADDRESS SS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
Registered Agents Inc	
7901 4thSt N. Ste300	
St. Petersburg, FL 33702	
ABOVE STATED CORPORATION AT THE P	AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE LACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR S REGISTERED AGENT AND AGREE TO ACT IN THIS
Rei X.	12/14/2022
Signature/Registered Agent	

### ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND	ADDRESS(ES) AND SPECIFIC TITLES:					
• ,	Brian Dalmaso, President	Name & Title:	Brian Dalmaso, Treasurer			
Address:	32 SE 2nd Ave Address:	Address:	32 SE 2nd Ave			
	Deiray Beach, FL 33444		Delray Beach, FL 33444			
Name & Title:	Brian Dalmaso, Director	Name & Title:				
Address:	32 SE 2nd Ave		142 Dunn Road			
71337535	Delray Beach, FL 33444	•	Ashburnham, MA 03356			
Name & Title: Address:	Brian Dalmaso, CEO 32 SE 2nd Ave Delray Beach, FL 33444	Name & Title: Address:	Brian Dalmaso, CFO 32 SE 2nd Ave Delray Beach, FL 33444			
Name & Title: Address:		Name & Title: Address:				
I submit this document and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155.F.S.    Oycelyr W Useh   12-15-2022     Sprature Authorized Person   Date						