

TRANSMITTAL LETTER

P99000056960

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

SUBJECT: MATRIX INCORPORATED
(Proposed corporate name - must include suffix)

Enclosed is 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: ALICE MALAXOS, PRESIDENT
Name (Printed or typed)

736 ISLAND WAY, APT 20
Address

CLEARWATER, FL 33767
City, State & Zip

727-443-3350
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUN 21 AM 9:45

FILED

100002910391--7
-06/21/99--01090--008
****137.50 ****128.75

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

ajc
6/23

FLORIDA DEPARTMENT OF STATE, SECRETARY OF STATE

CERTIFICATE OF DOMESTICATION

The undersigned, ALICE MALAXOS, PRESIDENT
 (Name) (Title)
 of MATRIX INCORPORATED a foreign Corporation,
 (Corporation Name)

FILED
 99 JUN 21 AM 9:45
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

in accordance with Florida Statutes, section 607.1801 does hereby certify:

1. The date on which corporation was first formed was DEC. 30, 1968.
2. The jurisdiction where the above named corporations was first formed, incorporated, or otherwise came into being was PENNSYLVANIA.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was MATRIX INCORPORATED.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to ss. 607.0202 and 607.0401 with this certificate is MATRIX INCORPORATED.
5. The jurisdiction that constituted the seat, siege, social principal place of business or central administration of the corporation, or any other equivalent thereto under applicable law immediately prior to the filing of the Certificate of Domestication was
736 ISLAND WAY, APT 704, CLEARWATER, FL. 33767

I am ALICE MALAXOS, of CLEARWATER, FL. PINELLAS COUNTY, FLORIDA
 and am authorized to sign this certificate of Domestication on behalf of the corporation and have done so this the 15 day of JUNE 19 99.

Alice Malaxos
 (Authorized Signature)

Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

Certificate of Status 8.75
\$137.50

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MATRIX INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

736 ISLAND WAY, APT. 704
CLEARWATER, FL 33767

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

2,000,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

WILLIAM MALAXOS
736 ISLAND WAY, APT. 704
CLEARWATER, FL. 33767

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

WILLIAM MALAXOS
736 ISLAND WAY, APT. 704
CLEARWATER, FL. 33767

William Malaxos

Signature/Incorporator

June 15, 1999

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation 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 comply 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

William Malaxos

Signature/Registered Agent

June 15, 1999

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUN 21 AM 9:45

FILED