DOC ID ----> 201631202650

| DATE | DOCUMENT ID | DESCRIPTION | FILING | EXPED | PENALTY | CERT | COPY |
|---|---|---|---|---|---|---|---|
| 11/07/2016 | 201631202650 | TRADE NAME REGISTRATION (RNO) | 39.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**Receipt**

This is not a bill. Please do not remit payment.

UNISEARCH INC.
3958-D BROWN PARK DR
HILLIARD, OH 43026

# STATE OF OHIO
## CERTIFICATE

### Ohio Secretary of State, Jon Husted

**3956736**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**MATRIX SYSTEMS**

and, that said business records show the filing and recording of:

| Document(s) | Document No(s): |
|---|---|
| **TRADE NAME REGISTRATION** | **201631202650** |

**Effective Date: 11/03/2016**

Date of First Use: 09/29/2016

Expiration Date: 11/03/2021

SGI MATRIX, LLC
1041 BYERS RD.
MIAMISBURG, OH 45342

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 7th day of November, A.D. 2016.

Jon Husted

**Ohio Secretary of State**

DOC ID ----> 201631202650

Form 534A Prescribed by:
JON HUSTED
OHIO SECRETARY OF STATE
Toll Free: (877) SOS-FILE (877-767-3453)
Central Ohio: (614) 466-3910
www.OhioSecretaryofState.gov
busserv@OhioSecretaryofState.gov
File online or for more information: www.OHBusinessCentral.com

**Mail this form to one of the following:**

Regular Filing (non expedite)
P.O. Box 670
Columbus, OH 43216

Expedite Filing (Two business day processing time. Requires an additional $100.00)
P.O. Box 1390
Columbus, OH 43216

# Name Registration

## Filing Fee: $39

### Form Must Be Typed

**CHECK ONLY ONE (1) Box**

☒ Trade Name
(167-RNO)

Date of first use: 09/29/2016
MM/DD/YYYY

☐ Fictitious Name
(169-NFO)

Matrix Systems
Name being Registered or Reported

SGI Matrix, LLC
Name of the Registrant

**Note: If the registrant is a partnership, please provide the name of the partnership. Individual partner names are not permitted but are required on page 2 of the form.**

Registrant's Entity Number (if registered with Ohio Secretary of State): 3950144

**All registrants must complete the information in this section**

The general nature of business conducted by the registrant:

Manufacture, Sale, and Installation of Access Control Systems

Business address:

1041 Byers Rd.
Mailing Address

Miamisburg
City

Ohio
State

45342
Zip Code

DOC ID ----> 201631202650

**Complete the information in this section if registrant is a partnership NOT registered in Ohio pursuant to ORC 1776, if partnership is registered, provide registration number on page one.**

Provide the name and address of at least one general partner:

| Name | Address |
|---|---|
| | |
| | |
| | |

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign corporation/limited liability company, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation/limited liability company licensed in Ohio under an assumed name, please provide the assumed name and the name as registered in its jurisdiction of formation.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

**Required**
Application must be signed by the registrant or an authorized representative.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

Signature: Bgk, CEO

By (if applicable):

Print Name: Bruce E. Rogoff

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

DOC ID ----> 201631202650

Form 590 Prescribed by:
JON HUSTED
OHIO SECRETARY OF STATE
Toll Free: (877) SOS-FILE (877-767-3453)
Central Ohio: (614) 466-3910
www.OhioSecretaryofState.gov
busserv@OhioSecretaryofState.gov
File online or for more information: www.OHBusinessCentral.com

# Consent for Use of Similar Name

**(To be filed with new business formation document or amendment to change business name where a name conflict will occur.)**

Name of Entity/Individual Giving Consent: Matrix Systems, Inc

Charter/Registration/License Number of Entity giving Consent: 495211

Gives it Consent To: SGI Matrix, LLC

To Use The Name: Matrix Systems

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

REQUIRED
Consent form must be signed by an authorized representative of the consenting entitiy.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Signature

By (if applicable)

Bruce E. Rogoff, CEO
Print Name

Signature

By (if applicable)

Print Name