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Division of Corporations

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From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 : (850)222-1092 Phone : (850)878-5926 Pax Number

FOREIGN PROFIT/NONPROFIT CORPORATION

SMS International Corp.

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES; THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.	SMS International	Corp.				
Ō	Enter name of con	paration; must include "INCORPORATE! 1," "Inc," "Co," or "Corp.")	D," "COMPANY,"	"CORPORATION,"		
•	Aug con con	is mes and as make h				
O	if name unavailab	s in Florida, enter alternate corporate nam	ne adopted for the pu	rpose of transacting business in Florida)		
Z	Delaware		3			
		der the law of which it is incorporated)		El number, if applicable)		
4. <u>1</u>	May 30, 1996		S. Perpetual			
	(Date of	incorporation)	(Duration: Year	corp. will coase to exist or "perpetual")		
6						
	(Outs first transacted business in Florida, if prior to registration) (SHE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)					
7. R	iverway I, 6133 N	orth River Road, Suite 700 Rosemont , Il	L 60018			
_		(Principal office as	• •			
	Riverway I, 6133 i	Vorth River Road, Suite 700 Rosement, 1	IL 60018			
		(Current mailing a	ddress)			
_ T	'o engage in any li	wful act or sotivity which corporations as	re orvanized under th	te General Corporation Law of Delaware		
8		f corporation authorized in home state or				
A 31						
9. N	emie and <u>smoot s</u>	ddress of Florida registered agent: (P	O. Box NOT acc	eptable)		
	Name:	C T Corporation System	·	—		
Offic	ce Address:	1200 South Pine Island Road				
		Plantation	. Fiorida	33324		
	-	(City)		(Zip code)		
10 1	Registered ages	itta armantamaan				
Havi	ing been named	as registered agent and to accept ser	vice of process for	the above stated corporation at the pla	C4	
desig	enated in this up	plication, I kereby accept the appoin	iment as registere	d agent and agree to act in this capacity	L I	
उभागा वसवै हे	ter agree to com Lam familiar wi	pty with the provisions of all statutes th and accept the obligations of my p	i relative to the pri position as revistes	per and complete performance of my d ad agent	uties,	
	•	C T Comoration System	Juan Gra	-		
			Assistant So	Crotary		
	Ву:	Juan bryoch				
	/	(Registered agent's signature	c)			
11. 4	Attached is a cer	tificate of existence duly authenticates	d, not more than 9	days prior to delivery of this application	an to	
the D	epartment of Su	ate, by the Secretary of State or other	official having cu	tody of corporate records in the jurisdic	tion	
		ch it is incorporated. Ses addresses of officers and/or direct	tors:			
2 T. T.	ABTRICA STATE OFFICE	osz stotteszes ot otticsia suctól cilect	ors:			

71/115 - 112/15/2000 C T System College

A. DIRI	ECTORS
Chairman	n
Address:	
-	
Vice Chai	irman;
Address:	·
_	
Director:	Yasımori Aoki
Address:	Discourse I 6112 North Disco Ornel Exists 355 December II 60010
Director:	Masato ishida
	Riverway I, 6133 North River Road, Suite 700 Resement , IL 68018
ATTEMENDE.	
B. OFFI	Yannari Andi
Address:	Riverway I, 6133 North River Road, Suite 700 Rosemont, IL 60018
Vice Presi	ident:
Address:	
Secondary	Yasunori Aoki
	Riverway 1, 6133 North River Road, Suite 700 Rosemont, IL 60018
-	Yasunori Aoki
	Riverway I, 6133 North River Road, Suite 700 Rosemont, IL 60018
NOTE: I	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	(Signature of Director or Officer listed in number 12 of the application)
y Yasu	mori Aoki, President
···· —	(Typed or printed name and conscity of nerson cipning application)

PLOIS - CLASSING CT System Colins



The First State

I, MARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERESY CERTIFY "SMS INTERNATIONAL CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF JULY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

070846134



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5867490

DATE: 07-24-07