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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

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

SUBJECT: INDUSTRIAL BLAST INC.					
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)			
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	a check for:			
\$70.00 \$78.75	\$78.75	\$87.50			
Filing Fee Filing Fee	Filing Fee	Filing Fee,			
& Certificate of Status	& Certified Copy				
		& Certificate of			
	A PODEMICAL A CO	Status			
	ADDITIONAL CO	PY REQUIRED			
FROM: William Allen MCLAIN					
FROM: WILLEN MCLAIN Name (Printed or typed)					
•					
1610 W. BAY DR.	# 107				
y	Address				
1000 +1 37	172				
LARGO FL. 33 City,	State & Zip				
72.7 482.94.03 Daytime/Telephone number					
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: TNDUS+RIAL BLAS+ INC.		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 16/0 W. BAYDR. #107 LAN	R9 0,	FL33770
ARTICLE III PURPOSE The purpose for which the corporation is organized is: SANDBLAS+ ING /VACCUM BLAS.	S+111	1g BusINOS
ARTICLE IV SHARES The number of shares of stock is: /OO		
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Will, Am, ALLEN MCLAIN / OWNER CEO 1610 W. BAY DR # 107 LARgo, FL. 33770	06 NOV -1 PM 3: 4	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: William A. Mc Lai N 1610 w. 3 Ay DR. #107 LARGO, FL. 33770	ဃ	OKS
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: WILLIAM ALLEN MCLAIN 1610 W. BAY DR. # 107		
LARGO, FL 33770 *********************************	**** lesigna	***** ated in this
Signature/Registered Agent William Ollon Myin Signature/Incorporator 10/3/06 Date 10/3/06 Date		