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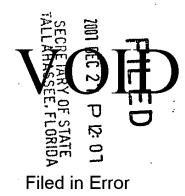
(Re	equestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

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

SUBJECT:	SMS HLOS	S TIC	UDE SUFFIX)
	(I KOI OSED CORI ORA	TE NAME – <u>MOST INCE</u>	OBE SOFTIA)
Enclosed are an orig	inal and one (1) copy of the artic	cles 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
		ADDITIONAL CO	Status PPY REQUIRED
FROM:	SMS ALLOY	(Printed or typed)	,
-	137 104	th AUC#1	<i>!</i> .
<u>:</u>	JREASURE City,	ISLAND, 7	L33706
-		8-800 >	

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

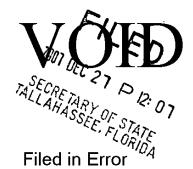
The name of the corporation shall be:

INC SMS ALLOYS

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

137 104th AVE #1 TREASURE ISLAND, 7L 33706



ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES & DISTRIBUTION of High Temperature ALLOYS
(Exotic" METALS)

ARTICLE IV SHARES

The number of shares of stock is: 100

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

CEO & PRESIDENT KATHIEEN MAGNER

ARTICLE VI · REGISTERED AGENT				
The name and Florida street address (P.O. Box NOT acceptable) of the	registered agent is:			
LATHIERN MAGNER				
PATHIERN MAGNER	/			
TROASURE ISLAND, FLO	3706			
ARTICLE VII INCORPORATOR				
The <u>name and address</u> of the Incorporator is:				
KATHICED MAGNER				
137 104th AVE #1				
KATH ICEN MAGNER 137 104th AVE #1 TREASURE ISLAND, FL	33706			
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity				
Signature/Registered Agent	Date 19, 2007			
Cathleen magner	^ -			
	Ne 19, 2007			
Signature/Incorporator U	Date			

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ACIENT