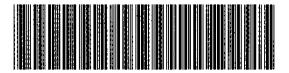
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SEUF SIANT OF SIATE
TALLAHASSEE, FLORIDA

~ 12/16/13

COVER LETTER

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

SUBJECT: Snorm Industries, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
	(PROPOSED CORPORA	ATE'NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)		
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status		
FROM:	Cedric D. Cray	e (Printed or typed)	.		
	213 S.W. Stafford	C+. Address			
Lake City, FL, 32024 City, State & Zip					

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

Ccray 1 @ hotmail. com
E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAM The name of the corpora	tion shall be: Snorm I	ndustries, I	nc,	
ARTICLE II PRI	NCIPAL OFFICE Principal street address	,	Mailing address, if different is:	
213 S.W. S.				· · · · · · · · · · · · · · · · · · ·
	POSE the corporation is organized is: the state of Floria		and complete ro	and maintenanc
ARTICLE IV SHA The number of shares of	RES stock is: 000			13 DEC 13 PH 12: 57 GLUANASSEE, FLORIDA
ARTICLE V INIT	TIAL OFFICERS AND/OR DI		SI .	
Name and Title	213 S.W. Stafford	Name an	d Title: Ttephanie	IV. Cray, VP
Address	Lake City, FL. 320	24	Lake City,	
Name and Title		Name an	d Title:	
Address				
				
Name and Title		Name an	d Title:	
Address				

Name a	and Title:	Name and Title:	
Addre	ss	Address:	
		<u> </u>	
ARTICLE VI			
The <u>name and</u>	Florida street address (P.O. Box NOT acceptable) o		
Name:	Cedriz Cray	_	≯ →
Address:	Cedrix Cray. 213 S.W. Stafford Ct.	_	3 DEC
	Lake City, FL. 32024	_	55 J. 1
ARTICLE VII	INCORPORATOR		DEC 13 PH IE: 57
The name and	address of the Incorporator is:		
Name:	Cedric Crmy	-	⋗
Address:	Cedric Crny 213 S.W. Stafford Ct. Lake Citys FL, 32024	_	
	Lake City, FL, 32024	_	
	amed as registered agent to accept service of process I am familiar with and accept the appointment as reg		
Ceda	Required Signature/Registered Agent		12-10-2013 Date
	Required Signature/Registered Agent		Date
	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felon		
Ced	Dequired Signature/Incorporator		12-10-2013
 	Required Signature/Incorporator		Date