

SANDRA G. KRAWITZ*

PAMELA M. BRESS

* AND MUMBER WASHINGTON, D.C. BAR

TELEPHONE 407, 395, 5010 FACSIMBLE 407, 394, 3009

June 28, 1995

Secretary of State Bureau of Corporate Records P.O. Box 6327 Tallahassee, Florida 32301

Re: AEROSPACE & ADVANCED TECHNOLOGIES, INC.

Dear Sir/Madam:

Enclosed is an original and one copy of the Articles of Incorporation for the above-referenced corporation. Also enclosed is our check in the amount of \$122.50 to cover the charges for filing fees, certification and registered agent.

Please return a "true certified copy" of the Articles of Incorporation showing that they have been received and filed. We have enclosed a self-addressed, stamped envelope for your convenience in returning same.

Thank you for your cooperation.

Very truly yours,

KRAWITZ & BRESS, P.A.

BY:

SANDRA G. KRAWITZ

SGK/ah

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ARTICLES OF INCORPORATION

OF

ABROSPACE & ADVANCED TECHNOLOGIES, INC.

We, the undersigned, natural persons competent to contract, do hereby make, subscribe and file these Articles of Incorporation for the purpose of organizing a corporation under the laws of the State of Florida.

ARTICLE I NAME OF CORPORATION

The name of this Corporation shall be:

AEROSPACE & ADVANCED TECHNOLOGIES, INC.

ARTICLE II GENERAL NATURE OF BUSINESS

The general nature of the business to be transacted by this Corporation shall be to engage in any and all lawful business permitted under the laws of the United States and the State of Florida.

ARTICLE III CAPITAL STOCK

The total authorized capital stock of this Corporation is 100 shares of Common Stock, par value \$1.00 per share. All Common Shares shall be identical with each other in every respect and the holders thereof shall be entitled to one vote for each share upon all matters on which shareholders have the right to vote.

ARTICLE IV TERM OF EXISTENCE

The Corporation shall exist perpetually.

ARTICLE V ADDRESS OF PRINC PAL OFFICE IN THIS STATE

The initial street audress of the principal office of this Corporation in the State of Florida is 8136 SE Palm Hammock Lane, Hobe Sound, FL 33455. The Board of Directors may from time to time move the principal office to another address in Florida.

ARTICLE VI INCORPORATOR

The name and street address of the Incorporators of these articles are:

RALPH PECORARO: 8136 SE Palm Hammock Lane, Hobe Sound, FL 33455

ARTICLE_VII DIRECTORS

There shall be a least one (1) member of the Board of Directors.

ARTICLE VIII INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation is 8136 SE Palm Hammock Lane, Hobe Sound, FL 33455, and the name of the initial registered agent of the Corporation at that address is RALPH PECORARO.

ARTICLE IX COMMENCEMENT OF CORPORATE EXISTENCE

Pursuant to Section 607.0203, Florida Statutes, this Corporation shall commence its corporate existence upon filing.

RALPH PECORARO

STATE OF FLORIDA COUNTY OF PALM BEACH

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County nan d above to take acknowledgements, personally appeared RALPH PECORARO, to me personally known, or who produced for the personal known, and who did not take an oath.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

Pursuant to Chapter 48.091, Florida Statutes, the following is submitted in compliance with said Act:

That RALPH PECORARO, desiring to organize under the laws of the State of Florida, with a Registered Office as indicated in the Articles of Incorporation at 8136 SE Palm Hammock Lane, Hobe Sound, FL 33455, with RALPH PECORARO as its Registered Agent, to accept service of process within this state, at that address $\mathbb{R}^{N_{\mathrm{c}}}$

ACKNOWLEDGEMENT

Having been named to accept service of process for the above-stated corporation at the place designated in this Cortificate I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

RALPH PECORARO

STATE OF FLORIDA COUNTY OF PALM BEACH

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared RALPH PECORARO, to me personally known, or who provided The day the contraction as identification and who did not take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this ______ day of _______, 1995.

My Commission Expires:

NOTARY PUBLIC, State of Florida

