CORPORATE ACCESS, /

P9900036659

236 East 6th Avenue . Tallahassee, Florida 32303

_CUS

INC. P.O. Box 37066 (32315-7066)

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CERTIFIED COFT	
	XFILING Articles
Corporate NAME & DOCUMENT#)	 - · · ·
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ARTICLES OF INCORPORATION

ARTICLE I NAME

The name of this corporation is GEMETALS, CORP.

The principal address and the mailing address of the initial of the office of this corporation is 400 NORTH STATE RD.7 SUITE 310 RESERVED FROM MARGATE, FLORIDA 33063.

ARTICLE II DURATION

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

ARTICLE III PURPOSE

This corporation is organized for the purpose of transacting any or all lawfull business.

ARTICLE IV CAPITAL STOCK

This corporation is authorized to issue 100 shares of \$1.00 par value common stock which shall be designated "Common Shares".

ARTICLE V PRE EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI INITIAL REGISTERED OFFICE AND AGENT

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The street address of the initial registered office of this corporation is 400 N.STATE ROAD 7 #310 MARGATE, FLORIDA 33063.

The name of the initial registered agent of this corporation at that address is ALICIA WILSON.

ARTICLE VII INITIAL BOARD OF DIRECTORS

This corporation shall have 1 Director constituting the initial Board of Directors. The number of Directors may be either increased or decreased from time to time by the ByLaws. The name and address of the initial Board of Directors of this corporation is

NAME

ADDRESS

ALICIA WILSON

400 N.STATE ROAD 7 # 310 MARGATE, FL. 33063

ARTICLE VIII INCORPORATORS

The name and address of each person signing these Articles is:

NAME

ADDRESS

ALICIA WILSON

400 N.STATE ROAD 7 # 310 MARGATE ,FL. 33063

ARTICLE IX INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 21 day of AUGUST, 1999

Subscribe:

STATE OF FLORIDA

COUNTY OF BROWARD

Before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared ALICIA WILSON known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and she acknowledged before me that she executed those Articles of Incorporation.

WITNESS WHEREOF, I have hereunto set mν hand IN County aforesaid, State affixed official seal in the and my this _21 day of _AUGUST , 1999.

Notary Public, State of Florida at Large

My commission Expires: 1025-00

OFFICIAL NOTARY SEAL
MARY L SCOTT
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC592554
MY LORD ESERT FXP OCT. 25,2000

3

OFFICIAL NOTARY SEAL MARY L'SCOTT NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC592554 MY COMMISSION EXP. OCT. 25,2000 CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

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GEMETALS, CORP.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA,

WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF MARGATE

STATE OF FLORIDA

, HAS NAMED ALICIA WILSON

LOCATED AT 400 N.STATE ROAD 7 #310

CITY OF MARGATE, FLORIDA AS ITS AGENT

TO ACCEPT SERVICE OF PROCESS WITHIN FLOR DA.

SIGNATURE:

(Corporate Officer)

TITLE:

PRESIDENT

DATE: APRIL 21 ,1999

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER PERFORMANCE OF MY DUTIES.

STGNATURE

(Resident Agent)

DATE _APRIL 21,1999

99 APR 22 AM II: 14
SECRETARY OF STATE
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