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

SUBJECT:	SUPERIOR NATIVES (Proposed corpor	rate name - must include sui	UNNOLOGIES, 2 ffix) 100002897 -06/07/99	
Enclosed is an origina	al and one(1) copy of the articles	s of incorporation and a c	check for:	5
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
	,	ADDITIONAL CO	PY REQUIRED	
FROM:	FROM: Thomas A. Edwards Name (Printed or typed) 740 71st Street Address		=	
			- <u></u>	. 0
	Midmi Beach, City, S	ECRETARY ALLAHASSI	39 JUN -7	
	(305) 865-0122		OF STA	AM 8: 09
	Daytime Telephone number		27	9

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Flori	rida
Business Corporation Act, hereby adopts the following Articles of Incorporation.	

ARTICLE I NAME

The name of the corporation shall be:

Superior native ambrican technologies, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

740 71St Street Miami Beach, FL 33141

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Thomas A. Edwards 740 715+ Street M. zm.; Bezch,FL 33141

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Thomas A. Edwards 740 7/54 Street Miam; Beah, FL 3314/

Signature/Incorporator

6/3/99

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date