



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
03/10/2005	200506802714	DOMESTIC ARTICLES/FOR PROFIT (ARF)	125.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

JERALD L MOSS
2806 PAYNE AVE
CLEVELAND, OH 44114

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell**1524473**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

AVON ALLOYS, INC.

and, that said business records show the filing and recording of:

Document(s)

DOMESTIC ARTICLES/FOR PROFIT

Document No(s):

200506802714

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 28th day of February,
A.D. 2005.

J. Kenneth Blackwell
Ohio Secretary of State

02/23/2005 11:23 4403275599

QUAL-FAB, INC

FEB-23-2005 11:14

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P.02/04Prescribed by **J. Kenneth Blackwell**

Ohio Secretary of State

Central Ohio: (614) 466-3910

Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.state.oh.us/sos

e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

☐ YesPO Box 1390
Columbus, OH 43216

*** Requires an additional fee of \$400 ***

☒ NoPO Box 670
Columbus, OH 43216**INITIAL ARTICLES OF INCORPORATION**

(For Domestic Profit or Non-Profit)

Filing Fee \$125.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

(1) ☒ Articles of Incorporation Profit (113-ARP) ORC 1701	(2) ☐ Articles of Incorporation Non-Profit (114-ARN) ORC 1702	(3) ☐ Articles of Incorporation Professional (170-ARP) Profession _____ ORC 1785
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Complete the general information in this section for the box checked above.

FIRST: Name of Corporation Avon Alloys, Inc.

SECOND: Location Olmsted Township Cuyahoga
(City) (County)

Effective Date (Optional) _____ Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.
(mm/dd/yyyy)

☐ Check here if additional provisions are attached

Complete the information in this section if box (2) or (3) is checked. Completing this section is optional if box (1) is checked.

THIRD: Purpose for which corporation is formed

Complete the information in this section if box (1) or (3) is checked.

FOURTH: The number of shares which the corporation is authorized to have outstanding (Please state if shares are common or preferred and their par value if any) 1000 Common 1.00
(No. of Shares) (Type) (Par Value)

(Refer to instructions if needed)

2005 FEB 20 PM 9:50

02/23/2005 11:23 4403275599

QUAL-FAB, INC

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P.03/04

Completing the information in this section is optional**FIFTH:** The following are the names and addresses of the individuals who are to serve as initial Directors.

(Name)

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

(City)

(State)

(Zip Code)

(Name)

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

(City)

(State)

(Zip Code)

(Name)

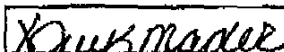
(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

(City)

(State)

(Zip Code)

REQUIREDMust be authenticated
(signed) by an authorized
representative
(See Instructions)

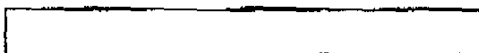
Authorized Representative

Jill Mader

(print name)

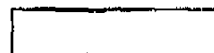
X2-23-05

Date

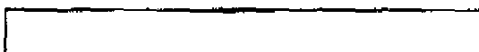


Authorized Representative

(print name)

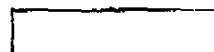


Date



Authorized Representative

(print name)



Date

FEB-23-2005 11:15

Complete the information in this section if box (1) (2) or (3) is checked.

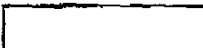
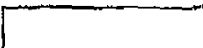
ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of Avon Alloys, Inc., hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is

Jill Mader
(Name)
6686 Columbia Road
(Street) NOTE: P.O. Box Addresses are NOT acceptable.

Olmsted Township, Ohio 44138
(City) (Zip Code)

Must be authenticated by an authorized representative

 Authorized Representative	<u>X8-23-05</u> Date
 Authorized Representative	 Date
 Authorized Representative	 Date

ACCEPTANCE OF APPOINTMENT

The Undersigned, Jill Mader, named herein as the Statutory agent for, Avon Alloys, Inc., hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: XJill Mader
(Statutory Agent)