DOC ID ----> 201229800661

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
10/24/2012	201229800661	DOMESTIC FOR PROFIT CORP - ARTICLES (ARF)	250.00	100.00		.00	.00

Receipt

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

BENETRENDS, INC.
ATTN: JENNIFER ROSENBERGER
1180 WELSH ROAD, SUITE 280
NORTH WALES, PA 19454

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jon Husted

2146006

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

THKM INCORPORATED

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

Document(s):	Document No(s):
DOMESTIC FOR PROFIT CORP - ARTICLES	**201229800661**

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 24th day of October, A.D. 2012.

Jon Husted

Ohio Secretary of State

Form 532A Prescribed by:
JON HUSTED
Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

Regular Filing (non expedite)
P.O. Box 670
Columbus, OH 43216

Expedite Filing **(Two-business day processing time requires an additional $100.00).**
P.O. Box 1390
Columbus, OH 43216

Initial Articles of Incorporation
(For Profit, Domestic Corporation)
Filing Fee: $125
(113 - ARF)

First: Name of Corporation: THKM Incorporated
(Name must include the following word or abbreviation: company, co., corporation, corp., incorporated, or inc.)

Second: Location of Principal office in Ohio
Pickerington (City) Ohio (State)
Fairfield (County)

2012 OCT 24 PM 11:11

Effective Date **(Optional)** _____ mm/dd/yyyy
(The legal existence of the corporation begins upon the filing of the articles or on a later date specified that is not more than ninety days after filing)

Third: 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.)

4,000	Common	NPV -0-
Number of Shares	**Type**	**Par Value**

Fourth: If the corporation is to have an initial stated capital, please state the amount of that stated capital

_____ Amount

****Note: ORC Chapter 1701 allows additional provisions to be included in the Articles of Incorporation that are filed with this office. If including any of these additional provisions, please do so by including them in an attachment to this form.****

ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of THKM Incorporated 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

Brian David Carpenter
Name

9205 Cotswold Drive
Mailing Address

Pickerington | Ohio | 43147
City | State | Zip Code

Must be signed by the Incorporators or a majority of the incorporators

Jennifer Rosenberger
Signature

Signature

Signature

ACCEPTANCE OF APPOINTMENT

The Undersigned, Brian David Carpenter, named herein as the
Statutory Agent Name

Statutory agent for THKM Incorporated
Corporation Name

hereby acknowledges and accepts the appointment of statutory agent for said corporation.

Statutory Agent Signature

SIGN HERE

Individual Agent's Signature/Signature on Behalf of Corporate Agent

☐ **If the agent is an individual and using a P.O. Box, check this box to confirm the agent is an Ohio resident.**

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required
Articles and original appointment of agent must be signed by the incorporator(s).

If the incorporator is an individual, then they must sign in the "signature" box and print his/her name in the "Print Name" box.

If the incorporator is a business entity, not an individual, then please print the entity name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print his/her name and title/authority in the "Print Name" box.

Jennifer Rosenberger
Signature

By

Jennifer Rosenberger
Print Name

Signature

By

Print Name

Signature

By

Print Name