Certificate of Authority FOREIGN Corporation		2 <del>8</del>		
→ Filing Fee: \$310.00 minimum		R.I. DE BUS <b>2017 OCT</b>		
y runing ree. 45 to 55 to minimum		CT SUB-ES		
Pursuant to the provisions of RIGL <u>7-1 2-1405</u> , the u applies for a Certificate of Authority to transact busin for that purpose submits the following statement:	• • •			
The name of the corporation is:		17A 17A 12:		
s	trategic Materials, Inc	101		
2. It is incorporated under the laws of:				
	DE			
3. The name, if different, which it elects to use in Rh	ode Island is	<u>,</u>		
(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company". "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:				
(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the *Fictitious Business Name Statement" to be filed with this application:				
4. The date of its incorporation is: 11/	30/1989			
And the period of its duration is: CHECK ONLY ON    Xi   Perpetual (on-going)   Date certain for dissolution	E BOX			
5. The address of its principal office is:				
17220 Katy Freeway, Suite 150 Houston,TX 77094				
6. The name and address of the initial registered agent/office of in Rhode Island:				
Agent Name	OGENCY GLOBAL INC			
Street Address ( <u>NOT</u> a P.O. Box)	2 Jefferson Boulevard,			
City/Town Warwick	State RHODE ISLAND	Zip Code 02888		

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos ri.gov FILED - 0CT 0 6 2017 /2:0/

BY Cu 314294

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:  Glass Recycling				
Glass (Necycling				
8. (a) The names and restate or country of which		optional, unless direct	ors are required under the laws of the	
NAME		ADDR	RESS	
			<del></del>	
<del></del>				
		Che	ck the box to indicate an attachment.	
	spective addresses of its principal which it is incorporated):	officers (mandatory if d	irectors are not required under the laws	
OFFICE	NAME		ADDRESS	
PRESIDENT	DENIS SUGGS	17220 Kaly F	reeway, Suite 150 Houston,TX 77094	
VICE PRESIDENT	MICHAEL RAMIRE?	17220 Kaly F	reeway Suite 150 Houston TX 77094	
TREASURER	KEVIN DARTEZ	17220 Katy F	reeway. Suite 150 Houston,TX 77094	
SECRETARY	NATHAN BUCHANAN	17220 Kaly F	reeway. Suite 150 Houston TX 77094	
		Che	eck the box to indicate an attachment.	
9. The aggregate number par value, and series, if a		to issue; itemized by cla	sses, par value of shares, shares without	
NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE	
100000	Common		01	
		· · · · · · · · · · · · · · · · · · ·	<del> </del>	
<del>-</del>				
10. (a) Estimate, in dollars, the value of all property to be owned by the corporation for the following year, wherever to be located within Rhode Island during the following year:				
located: \$	300,000,000	\$	0	
(c) Estimate, as a percentage, the proportion that the estimated value of the property of the corporation to be located				
within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. <i>Note. Divide</i> (10h) by (10a) and multiply by 100 to obtain the percentage.				
%				

11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.	(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.		
\$	\$		
(c) Estimate, as a percentage, the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. Note: Divide (11h) by (11a) and multiply by 100 to obtain the percentage.			
12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filling of this document.			
13. Date when the Certificate of Authority will be effective: CHECK ONLY ONE BOX			
Date received (Upon filing)  Later effective date (Date must be no more than 90 days from the day of filing)			
Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.			
Type or Print Name of Authorized Officer	Date		
Nathan Bucharan	9/27/2017		
Signature of Authorized Officer of the Corporation  SIGN DUIDUMENT HERE			

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## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STRATEGIC MATERIALS, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF SEPTEMBER,

A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STRATEGIC MATERIALS, INC." WAS INCORPORATED ON THE THIRTIETH DAY OF NOVEMBER, A.D. 1989.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

A STATE OF THE STA

Authentication: 203303849

Date: 09-27-17

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