SECRETARY OF THE STATE OF CONNECTICUT

MAILING ADDRESS: COMMERCIAL RECORDING DIVISION COMMERCIACY SECRETARY OF THE STATE, P.O. BOX 150470, HARTFORD, CT 06115-0470 DELIVERY ADDRESS: COMMERCIAL RECORDING DIVISION, COMMERCIAL SECRETARY OF THE STATE, 30 TRINITY STREET, HARTFORD, CT 06106 PHONE: 860-509-6003

WEBSITE: WWW.concord-sols of gov

CERTIFICATE OF INCORPORATION NONSTOCK CORPORATION

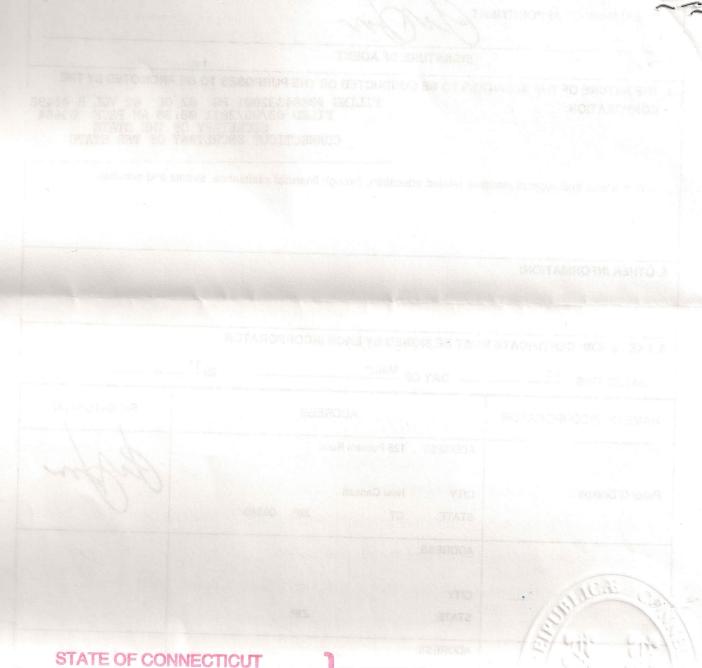
C.G.S. §§34-109; 34-122

FILING #0004332801 PG 01 OF 02 VOL B-01498 FILED 03/08/2011 08:30 AM PAGE 03683 SECRETARY OF THE STATE CONNECTICUT SECRETARY OF THE STATE

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH I

NAME: ADDRESS: CITY:	Peter G. Drakos 300 First Stamford Place-2F		FILING FEE: \$50			
ADDRESS:	CREATION			CHECKS PAYABLE TO "SECRETAR		
	300 First Stamford Place-2E					
CITY:		300 First Stamford Place-2E				
A second and	Stamford					
STATE:	CT ZIP: 06902					
1. NAME OF C	ORPORATION:					
CMA Educa	tion Foundation, Inc.					
THE CORPORA	TION IS NONPROFIT AND SHALL NO S.	T HAVE OR ISSUE	SHARES OI	F STOCK OR MAKE		
2. PLACE A CH	HECK NEXT TO THE APPROPRIATE	STATEMENT:		and		
A. THE COR	PORATION SHALL NOT HAVE MEM	BERS.				
B. THE COF	PORATION SHALL ONLY HAVE ME	MBERS, WHICH AR		ITLED TO VOTE.		
C. THE COR	PORATION SHALL HAVE ONE CLAS	S OF MEMBERS.				
The second se						
line	PORATION SHALL HAVE MULTIPLE	CLASSES OF MEN	BERS WHI	CH CLASSES ARE		
	TED AS FOLLOWS: MANNER OF ELECTION AND APPOINTMENT	OF MEMBERS ALONG L		HALIFICATIONS AND RIGHTS MAY F		
	CERTIFICATE OR IN THE CORPORATION'S E					
	INT OF REGISTERED AGENT: (PLEASE					
	SAGENT NAME: Peter G. Drakos					
BUSINESS AD	DRESS: (P.O.BOX UNACCEPTABLE)	RESIDENCE	RESIDENCE ADDRESS: (P.O.BOX UNACCEPTABLE)			
ADDRESS:	Peter G. Drakos, LLC	ADDRESS:	128 Putn	am Road		
I aprese.	300 First Stamford Place-2E					
CITY:	Stamford	CITY:	New Car	naan		
STATE:	CT ZIP: 06902	STATE:	СТ	ZIP: 06840		
STATE.	NTITY ACENT NAME					
B. BUSINESS E	ENTITY AGENT NAME:					
B. BUSINESS E	D.BOX UNACCEPTABLE)					
B. BUSINESS E						
B. BUSINESS E ADDRESS: (P.C						
B. BUSINESS E ADDRESS: (P.C						
B. BUSINESS E ADDRESS: (P.C ADDRESS:						

ACCEPTANCE OF APPOINT	MENT JUNT	r		
	SIGNATURE OF AG	ENT		
4. THE NATURE OF THE ACTI CORPORATION:	FIL	ING #0004332 FILED 03/ S CONNECTICU	801 PG 02 08/2011 08 ECRETARY 01 T SECRETAR	OF 02 VOL B-014 30 AM PAGE 0368 F THE STATE Y OF THE STATE
To promote and support ma	ritime related education, th	rough financial as	sistance, event	s and activities.
5. OTHER INFORMATION:				
6. EXECUTION: CERTIFICATE	MUST BE SIGNED BY EA	ACH INCORPOR	ATOR	
DATED THIS 3rd	DAY OF March		, 20 <u>11</u>	
NAME OF INCORPORATOR	A	DDRESS		SIGNATURE(S)
	ADDRESS: 128 Putnam	Road		bit
Peter G Drakos	CITY New Canaar STATE: CT	ו ZIP: 0684	0	affin
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A TOR	CITY			
	STATE:	ZIP:	•	
12/202 201	ADDRESS:			
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	CITY		io lass g	
	STATE:	ZIP:		
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OFFICE OF THE SECRETARY OF THE STATE I hereby certify that this is a true copy of record

in this Office In Testimony whereof, I have hereunto set my hand, and affixed the Seal of said State, at Hartford,

day of June A.D. 2011 this SECRETARY OF THE STATE T