

TRANSMITTAL LETTER  
PO/000011674

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

100003590371--4  
-01/29/01--01109--024  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: GO SAFETY, INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee  
☐ \$78.75 Filing Fee & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy  
☒ \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FILED  
01 JAN 29 PM 3:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FROM: PER ALEXANDER SOPP  
Name (Printed or typed)

1430 BRICKELL BAY DR APT 701  
Address

MIAMI, FLORIDA 33131  
City, State & Zip

(305) 358-3542  
Daytime Telephone number

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

D. BROWN JAN 3 1 2001

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TALLAHASSEE, FLORIDA

## **ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### *ARTICLE I NAME*

The name of the corporation shall be:

**Go Safety, Inc**

### *ARTICLE II PRINCIPAL OFFICE*

The principal place of business/mailling address is:

**1430 Brickell Bay Dr apt 701  
Miami, Florida 33131**

### *ARTICLE III PURPOSE*

The purpose for which the corporation is organized is:

**This corporation is authorized to transact any activities or businesses permitted under the laws of the State of Florida.**

### *ARTICLE IV SHARES*

The number of shares of stock is:

**The amount of capital with which this corporation shall begin business be at least Five Hundred (500.00) Dollars, or such greater amount as may required by law.**

### *ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)*

The name(s) and address(es):

**Per Alexander Sopp  
1430 Brickell Bay Dr apt 701  
Miami, Florida 33131**

### *ARTICLE VI REGISTERED AGENT*

The name and Florida street address of the registered agent is:

**Per Alexander Sopp  
1430 Brickell Bay Dr apt 701  
Miami, Florida 33131**

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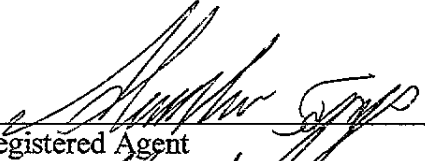
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

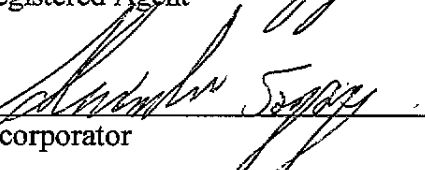
Per Alexander Sopp  
1430 Brickell Bay Dr apt 701  
Miami, Florida 33131

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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

01/23, 2001  
Date

  
\_\_\_\_\_  
Signature/Incorporator

01/23, 2001  
Date