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SECRETARY OF STATE
TALLAHASSEE, FLORIF,

TRANSMITTAL LETTER

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

SUBJECT:	School	Keeper	Entert	ainment	Corp
	(PRO	POSED CORPORATE	NAME - MUST INC	anndakinaarx)	- 1

—	,		_/
570.00	□ \$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
		1	& Certificate of
			Status
		ADDITIONAL COP	Y REQUIRED
			-

FROM: Steven Minick
Name (Printed or typed)
1280 5W 19 Ave
Address
Boca Ration FL 33486
646-335-7921
Daytime Lelenhone number

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) NAME ARTICLE I The name of the corporation shall be: School Keeper Entertainment Corp. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1220 SW 19 AVE Boca Ration, FL 33486 **PURPOSE** ARTICLE III The purpose for which the corporation is organized is: Entertainment ARTICLE IV **SHARES** The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): President: Steven Minick Secertary: Steven Minick Treasurer: Steven Minick ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: STEVEN MINICK 1280 SW 19 AVE BOCA ROTON, FL 33486 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: STEVEN MINICK 1280 SW 19 AVE BOCA RATION, FL 33486 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 10-26-04 Date

10 - Z6 - 04 Date

Signature/Registered Agent

Signature/Incorporator

Separate Article EFFECTIVE DATE:

Jan. Z, 2005

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TALLAHASSEE, FLOGIE.