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To:

Division of Corporations

Fax Number : (850)205-0381

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

COMMUNIKIDS INC.

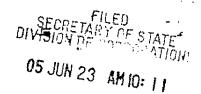
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ARTICLES OF INCORPORATION OF

The undersigned incorporation, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of incorporation:

ARTICLE I NAME

The name of the corporation shall be:

COMMUNIKUS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

8952 Iron Oak Avenue Tampa, Fl 33647

ARTICLE HI PURPOSE

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the state of Florida or any other state, country, territory or nation.

ARTICLE IV SHARES

The number of shares of stock is:

One thousand shares of common Stock at one Dollar per value

ARTICLE V TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI OFICERS AND/OR DIRECTORS

The name and street address of the incorporator to this articles of incorporation is:

Martia Zambrano 8952 Iron Oak Avenue Tampa FL, 33647

ARTTICLE VII INCORPORATOR

Mario Rubiano. 8952 Iron Oak Ave. Tampa FL 33613

IN WITNESS WHERE OF, the undersigned incorporator has executed these Articles of Incorporation this <u>June 20</u> of <u>2005</u>

Signature of Incorporator

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent in the State of Florida.

1. The name of the corporation:

Communikids In C.

The name and address of the registered agent and office is:

Marha Zambrann (P.O. Box not acceptable)

8952 Iron Oak Avenue, Tampa, Fl 33647 (City/State/Zip)

Title President

HAVING BEEN NAMED TO ACCEP SERVICE FOR THE ABOVE STATED CORPORATION AT THE PLACE DEISGNATED IN THIS CERTIFICATE. I HERBEBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH THE PROVITIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANACE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLOTIDA STATUTES,

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