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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Go Pro Services, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P07000079963

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anthony M. CERCEO
(Name of Contact Person)

Go Pro Services, Inc
(Firm/Company)

2729 CHADSFORD CIRCLE #105
(Address)

DAVIDO, FL 32765-7273
(City/State and Zip Code)

For further information concerning this matter, please call:

Anthony CERCEO at (407) 677-4776
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy |

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF CORRECTION

2007 NOV -1 AM 11:23

for

GO PRO SERVICES, Inc.

Name of Corporation as currently filed with the Florida Dept. of State

P07000079963

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct OFFICERS - Amendment
(Document Type Being Corrected)

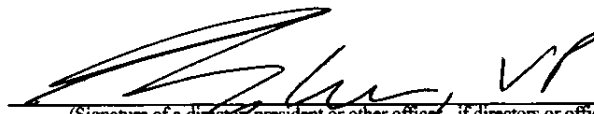
filed with the Department of State on 10/10/07
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

OFFICER RELIEVED OF OBLIGATIONS (CONTRACTUAL)

Correct the inaccuracy, incorrect statement, or defect:

DELETE LEO. J. CROSS, AVP


(Signature of a director, president or other officer - If directors or officers have not been selected, by an incorporator - If in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Anthony M. CERCEO, VP
(Typed or printed name of person signing)

VP/Dir Ops
(Title of person signing)

Filing Fee: \$35.00