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PICK-UP WAIT MAIL			
(Business Entity Name)			
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(Document Number)			
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COVER LETTER

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

SUBJECT: GoProKidz Incorpora	ated.	
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL C	OPY REQUIRED
FROM: Isny S. Pierre	(Printed or typed)	
575 ne 162st		· · · · · · · · · · · · · · · · · · ·
P	Address	
miami fla.33162	State & Zip	
Daytime To	elephone number	
Miamigreenroom@gm E-mail address: (to be used	ail.com	notification)

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

RECITIVED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 21, 2012

ISNY S. PIERRE 575 NE 162 ST MIAMI, FL 33162

SUBJECT: GOPROKIDZ INC. Ref. Number: W12000010135

We have received your document for GOPROKIDZ INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box is not acceptable.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please include the address for the CFO of the corporation.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 412A00007558

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

ARTICLE I The name of the cor	NAME GoProKidz Inc.		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing add	dress, if different is:
	75 ne 162st	***************************************	
m	iami fla.33162		
ARTICLE III I			
The purpose for whe	ich the corporation is organized is:		
ARTICLE IV The number of share	<u>SHARES</u> es of stock is50,000,000 shares		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	ORS	
	le:Isny S. Pierre Ceo		
Address:	575 ne 162st	Address:	
	miami fla.33162		
Name and Tit	le:Andy Louissaint /CFO	Name and Title:	
Address:	le:Andy Louissaint /CFO 575 ne 162st	Address:	"
	miami fla.33162		
Name and Tit	le:		
Address:			
	· · · · · · · · · · · · · · · · · · ·		
	REGISTERED AGENT		<u>~</u> \$2.
The <u>name and Flor</u> Name:	ida street address (P.O. Box NOT acceptable Andy Louissaint /CFO) of the registered agent is:	2
Address:	575 ne 162st		
, 10010,,,,	miami fla 33162		2
45000000000			
	INCORPORATOR ress of the Incorporator is:		
Name:	Isny Pierre		
Address:			9: 02
	575 ne 162st miami fla.33162		N 28-79
Umino kan nama	d ay registered agout to accent complex of pro-	east for the above stated corner	(I) nation at the place decionated in
	l as registered agent to accept service of pro- familiar with and accept the appointment as i		
		*	
(lm	Required Signature/Registered Agent		3/16/2012
	Required Signature/Registered Agent		Date
			alaa information askasidad i
	nent and affirm that the facts stated herein o partment of State constitu tes a third degree fel		
and the state of t	0/1)	and the second s	1 ,
<i>/</i>		***	3/16/2012
	Required Signature/Incorporator		bale