

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

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Account Number : FCA000000023 : (850)222-1092 Fax Number : (850)878-5368

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Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION GO SHOP SOLUTIONS INC.

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CT CORPORATION

COVER LETTER

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

14

SUBJECT: GO SHOP SOLUT	ions inc.			
	ROPOSED CORPORA	TE NAME – <u>MUST INC</u> I	UDE SUFFIX)	- .
Enclosed are an original and o	ne (1) copy of the art	icles of incorporation an	d a check for:	
\$70.00 \$78.75 Filing Fee Filing & Cert	Fee ificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy	
		ADDITIONAL CO	& Certificate of Status	
FROM: Jean-Pierre Hu	ard			
PROM.	Nam	e (Printed or typed)		
1100, boulevard	René-Lévesque Ouest,	25e étage		
		Address		
Mantrial (Outh	ec) Canada H3B 5C9			
Montreat (Anen	•	State & Zip		7
#44 22	2,	, 		12 APR
514.397,6732		Palanta		PR
	Daytime	Telephone number		$\bar{\omega}$
Jean-Pierre.Hua	rd@bcf.ca	•		
E-n	nail address: (to be use	d for future annual report	notification)	MH 11: 54

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

FL001 - 10/85/2010 C T System Online



ARTICLES OF INCORPORATION

	in compliance with Chapter 50 / 8	ind/or Chapter 621	12 APR 13 AMII:
ARTICLE I	NAME CO SHOP GOT LITTONS D	10	
The name of the co	NAME orporation shall be: GO SHOP SOLUTIONS IN	iC.	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address		Mailing address, if different is:
	690 des Chateigniers		
	Boucherville (Québec)	<u> </u>	·
9	Canada J4B 8S2		
RTICLE III	PURPOSE		
	hich the corporation is organized is:		
E-commerce solu	itions		
		á	
RTICLE IV	SHARES		
	res of stock is: 1,000,000		
		222	
Name and Ti	INITIAL OFFICERS AND/OR DIRECTO itle: James Paladino, President and Director	Name and Tit	tle. Michael Paladino, VP, Secretary & Directo
Address:	690 des Chateigniers	Address:	690 des Chateigniers
Addi Coo.	Boucherville (Québec)		Boucherville (Québec)
	Canada J4B 8S2		Canada J4B 8S2
		NI 1 772	41
Name and Tr Address:	itle:	Name and III	
Address:		Audiess:	
			
	tle:	Name and Ti	
Address:			
			
			
	REGISTERED AGENT		
	rida street address (P.O. Box NOT acceptable)	of the registered at	gent is:
Name:	C T Corporation System 1200 South Pine Island Road	_	
Address:	Plantation, Florida 33324.	_	
	Figuration, Florida 35524.		
	INCORPORATOR		
	Iress of the Incorporator is:		
Name:	Leah Christensen		
Address:	55 E. Monroe Street, Suite 3300 Chicago, IL 60603		
	Cricago, IL 00003		
aving been name	ed as registered agent to accept service of proc	ess for the above .	stated corporation at the place designated in
is certificate, I an	n fumiliar with and accept the appointment as t	registered agent an	d agree to act in this capacity
. 17	CT Corporation System Katle Szr	amek	
Las	Assistant S	ecretary	4/13/2012
7	Required Signature/Registered Agent		Date
and a state of the same	want and affirm that the first stand to		run three tha foles information rubuited in a
	ment and affirm that the facts stated herein a epartment of State constitutes a third degree fel		
	sparament of trute constitutes a truta active for	ony as province for) our move / 12 day & vari
	unconstr		4.13.2012
	Required Signature/Incorporator		Date
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