

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

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SUBJECT:	GO-PRO EN	VTERPA SES prate name - must include su	INC,	_
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		ان	000024469 03/04/9801	
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	****131.25 check for :	****131.25
	.,			
\$70.00	□ \$78.75	□\$122.50	조 \$131.25	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
· ·	& Certificate	& Certified Copy	Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	VAN K.			
	Name (P	rinted or typed)		
	527 50u	TH 28 TH AVI	E.	
2 17-11 1 7 21 -	en e	Address	en e	

Hollywood FL. 33020 City, State & Zip

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



ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

The name of the corporation shall be:
GO-PRO ENTERPRÈSES, INC.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
527 SOUTH 28 TH AVE
HOLL9wood, PC. 33020
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: VAN K. ISLEE 527 SOUTH 28 TH AUE HOLLYWOOD, FL. 33020
ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
VAN K. ISLER 527 SOUTH 28 HAVE.
527 SOUTH 28 TH AVE.
focey wood FL _ 33020
Van K. Jelon 2/26/98
Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent Date