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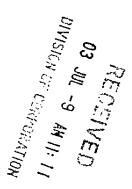
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SECRETARY OF STATE
TALL AHASSEE, FLORID.





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CORPORATION NAME(S) & I	OCUMENT NUMBI	ER(S) (if known):	
1. GINA SANIO	S FNC:		
(Corporation Name)		(Document #)	
2. (Corporation Name)	• • _	(Document #)	
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NEW FILINGS	AMENDMEN	TS	
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/Director		
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Domestication	Dissolution/Withdrawal		
Other	Merger		
<u> </u>	<u> </u>		
OTHER FILINGS	REGISTRATION/ QUALIFICATION		
Annual Report			
Fictitious Name	Foreign		
Name Reservation	Limited Partnership		
	Reinstatement		
	Trademark		
	Other	Turking Talkinia	

Examiner's Initials

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ARTICLES OF INCORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

GINA SANTOS INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

311 NW 45 AVE MIAMI FL. 33126

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GEORGINA SANTOS
311NW45 AVE
MIAMI FL. 33126

<u>ARTICLE V - INCORPORATOR</u>

The name and street address of the incorporator to these Articles of *Incorporation is:*

SEORGINA SANTOS 311 NW 45 AVE MIAMIFL 33/26 The undersigned incorporator has executed these Articles of

Incorporation this 2 day of July 2003

Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

GEORGINA SANTOS (P) 311 NW 45 AVE MIAMIFL. 33126

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Alorama Sonts Régistered/Agent Signature