# P0300099994

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#### TRANSMITTAL LETTER

#### Via Federal Express!

September 3, 2003

Department of State Division of Corporations P.O. 6327 409 E. Gaines St. Tallahassee, FL 32314

	IRL PRODUCTIONS, INC. DSED CORPORATE NAME - M	UST INCLUDE SUFFIX)		
Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for:				
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Cor  ADDITIONA	□ \$87.50 Filing Fee Dy Certified Copy & Certificate of Status	

Please return same to us in the Federal Express Envelope attached hereto.

FROM: MERRILL A. BOOKSTEIN. COUNSELOR AT LAW. P.A.

Name (Printed or typed)

2499 Glades Road. Suite 308

Address

Boca Raton. Florida 33431

City, State & Zip

(561) 361-9454

Daytime Telephone number

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

#### ARTICLES OF INCORPORATION

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

# FILED

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SECRETARY OF STATE TALL AHASSEE FLORIDA

#### ARTICLE I NAME

The name of the corporation shall be:

**OUR GIRL PRODUCTIONS, INC.** 

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2499 Glades Road, Suite 308 Boca Raton, FL 33431

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all activities which are lawful under the laws of the State of Florida.

#### ARTICLE IV SHARES

The number of shares of stock is:

1,000 Shares at \$1.00 Par Value

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Merrill A. Bookstein, Counselor at Law, P.A. 2499 Glades Road, Suite 308 Boca Raton, Florida 33431

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Merrill A. Bookstein, Counselor at Law, P.A. 2499 Glades Road, Suite 308 Boca Raton, Florida 33431

Having been peopled as registered agent to accept se	ervice of process for the above stated corporation at the
place designated in this certificate, I am familiar wi	ith and accept the appointment as registered agent and
agree to extinity capacity	ith and accept the appointment as registered agent and
	/ /
	al . / A 3

Signature Registered Agent

Signature/Interporator

Date /

Date/