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(Requestor's N	lame)
(Address)	
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(City/State/Zip/	(Phone #)
PICK-UP WA	IT MAIL
(Business Enti	ty Name)
(Document Nu	mber)
Certified Copies Certi	ficates of Status
Special Instructions to Filing Office	ar:
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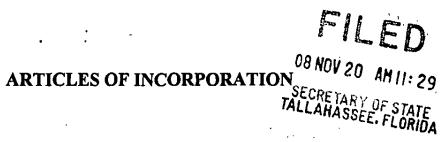
TRANSMITTAL LETTER

Ka.

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

SUBJECT:	GIR Con	sulting, Inc.					
(Proposed corporate name - must include suffix)							
Enclosed is an originator:	I and one (1) co	py of the articles o	f incorporation	and a check 7			
\$70.00	× \$78.75	\$122.50	\$131.25	1			
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate				
		Additional Copy	y Required				
				j			
FROM: Giovanna Rodriquez							
Name (printed or typed)							
995 S.W 84th Ave. # 122							
Address							
City, State & Zip							
(305) 266-2762							
Daytime Telephone number							

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



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:

GIR Consulting, Inc.

ARTICLE II PRINCIPAL OFFICE

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

995 S.W 84th Ave., Apt. 122 Miami, FL 33144

ARTICLE III SHARES

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

100 share @ \$1.00 per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Giovanna Rodriguez 995 S.W. 84th Ave. # 122 Miami, FL 33144

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Giovanna Rodriguez, President 995 S.W 84th Ave. # 122 Miami, FL 33144

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

 18	day of _	November	<u>2008</u>
		1.	ance Jugues
			Signature
			Signature
			Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is: GIR Consulting, Inc.	
		_
2.	The name and address of the registered agent and office is: Giovanna Rodriguez (Name)	
	Giovanna Rodriguez (Name)	A
	0/2 _	· LII
	995 S.W 84th Ave. # 122	
	(P.O. Box not acceptable)	
	Miami, FL 33144	
•	(City/State/Zip)	.•

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.

Nov.18, 2008 Date

(Signature