

## TRANSMITTAL LETTER

P01000050481

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

800004215948--5  
-05/14/01--01136--013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:

Gio-BELL INC  
(PROPOSED CORPORATE NAME - MUST 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

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM:

Seagio PALOMO  
Name (Printed or typed)

3550 NW 169 ST #212  
Address

N. MIAMI BEACH FL 33160  
City, State & Zip

305-968-5880  
Daytime Telephone number

01 MAY 14 AM 8:48  
FILED  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

T. Buren MAY 22 2001

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

910-BELL, INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3550 NW 169 ST #212  
N. MIAMI BEACH FL 33160

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

## ARTICLE IV SHARES

The number of shares of stock is:

50

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

P.: SERGIO PALOMO  
3550 NW 169 ST #212  
N. MIAMI BEACH FL 33160

## ARTICLE VI REGISTERED AGENT

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

IZABEL PALOMO  
3550 NW 169 ST #212  
N. MIAMI BEACH FL 33160

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SERGIO PALOMO  
3550 NW 169 ST #212  
N. MIAMI BEACH FL 33160

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

\_\_\_\_\_  
Signature/Registered Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

FILED  
01 MAY 14 AM 8:48  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA