

2/17/23, 12:16 PM

Division of Corporations
 Florida Department of State
 Division of Corporations
P23000063170
 Electronic Filing Cover Sheet

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To:
 Division of Corporations
 Fax Number : (850)617-6381

From:
 Account Name : DOSSANTOS AND MACHADO, LLC
 Account Number : I20140000089
 Phone : (754)301-2128
 Fax Number : (954)252-4650

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: INFO@GFSTAXACCT.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
 GABBYCPB MEDIA CORP**

2023-02-17 PM 3:27

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2/17/23

COVER LETTER

H23 0000 631053

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

SUBJECT: GABBYCPB MEDIA CORP

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: JULIANA MACHADO
Name (Printed or typed)

11764 W SAMPLE RD STE 102
Address

CORAL SPRINGS FL 33065
City, State & Zip

754-301-2128
Daytime Telephone number

INFO@GFSTAXACCT.COM
E-mail address: (to be used for future annual report notification)

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

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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: GABBYCPB MEDIA CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

2578 NW 63RD LN
BOCA RATON FL 33496

Mailing address, if different is:

2578 NW 63RD LN
BOCA RATON FL 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gabriela Passaro Barbieri - President

Address: 2578 NW 63RD LN

BOCA RATON FL 33496

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Gabriela Passaro Barbieri
 Address: 2578 NW 63RD LN
BOCA RATON FL 33496

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gabriela Passaro Barbieri
 Address: 2578 NW 63RD LN
BOCA RATON FL 33496

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)


Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


 Required Signature/Registered Agent

2/17/2023
 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


 Required Signature/Incorporator

2/17/2023
 Date