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COVER LETTER

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

SUBJECT:	Capella Energy, Inc		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
☑ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL CO	PY KEQUIKED
FROM:	Victor Graham, Ph.D. Name (Printed or typed)		
		E Nome Drive	
	•	i i i i i i i i i i i i i i i i i i i	
	Port St. Lucie, FI 34984 City, State & Zip		
	Cny,	State & Zip	
		879-3693	
	Daytime 1	elephone number	,
	E-mail address: (to be use	d for future annual report	notification)
	,	*	,

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

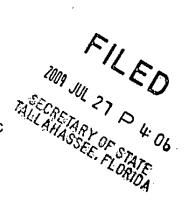
ARTICLES-OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Capella Energy, Inc



ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

533 SE Nome Drive

Port St. Lucie

FL 34984

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation.

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Victor Graham, Ph.D.

533 SE Nome Drive

Port St. Lucie, FL 34984

ARTICLE VI REGISTERED AGENT

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

Victor Graham, Ph.D.

533 SE Nome Drive

Port St. Lucie, FL 34984

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Victor Graham, Ph.D.

533 SE Nome Drive

Port St. Lucie, FL 34984

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

Myraham	7/23/2009
Signature/Registered Agent	Date
Ugrahan	7/23/2009
Signature/Incorporator	Date