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(Requestor's Name)

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(City/State/Zip/Phone #)

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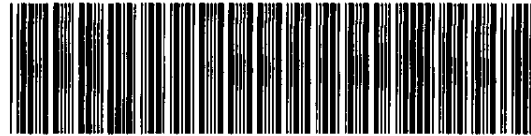
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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400

COVER LETTER

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

SUBJECT: Gabella Transport, Inc.

(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: C. Blaine Boudman

Name (Printed or typed)

2109 SE Genoa Street

Address

Port St. Lucie, FL 34952

City, State & Zip

772-341-0076

Daytime Telephone number

Bsquare0225@aol.com

E-mail address: (to be used 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:

Gabella Transport, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2109 SE Genoa Street

Port St. Lucie, FL 34952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hauling Freight

ARTICLE IV SHARES

The number of shares of stock is:

Two (2)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

C. Blaine Boudman	Vicki Boudman
Director	Director
2109 SE Genoa St.	2109 SE Genoa St.
Port St. Lucie, FL 34952	Port St. Lucie, FL 34952

ARTICLE VI REGISTERED AGENT

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

Vicki Boudman

2109 SE Genoa St.

Port St. Lucie, FL 34952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

C. Blaine Boudman

2109 SE Genoa St.

Port St. Lucie, FL 34952


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

09/19/2010

Date



Signature/Incorporator

09/19/2010

Date

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TALLAHASSEE, FLORIDA