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DIVISION OF CORPORATIONS
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CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Gabi Transmission Service Inc (Corporation Name) (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- | | | |
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NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

ARTICLES OF INCORPORATION

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

ARTICLE I NAME GABI TRANSMISSION SERVICE INC

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
600 NW 22ND AVE
MIAMI
FL 33125

Mailing address, if different is:
600 NW 22ND AVE
MIAMI
FL 33125

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
REPAIRS OF CAR TRANSMISSIONS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES @ 1.00 PER VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRESIDENT
Address: GABRIEL QUINTANA
600 NW 22ND AVE
MIAMI FL 33125

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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ARTICLE VI REGISTERED AGENT

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

Name: GABRIEL QUINTANA
Address: 600 NW 22ND AVE
MIAMI FL 33125

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GABRIEL QUINTANA
Address: 600 NW 22ND AVE
MIAMI FL 33125

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

X Gabriel Quintana
Required Signature/Registered Agent

10/05/2010
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.

X Gabriel Quintana
Required Signature/Incorporator

10/05/2010
Date