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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

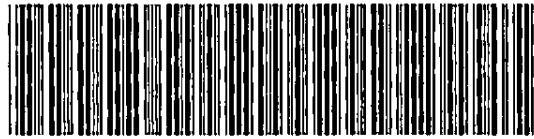
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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17 SEP 16 AM 9:14  
STATE OF FLORIDA

09/15/17

## COVER LETTER

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

**SUBJECT:** GAB IT TECH 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  
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:** GRACE W BASSEY

\_\_\_\_\_  
Name (Printed or typed)

2577 SW 120th Avenue

\_\_\_\_\_  
Address

Miramar, FL 33025

\_\_\_\_\_  
City, State & Zip

786-294-4815

\_\_\_\_\_  
Daytime Telephone number

wasinda2002@yahoo.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** GAB IT TECH INC.  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address Mailing address, if different is:  
2577 SW 120th Avenue \_\_\_\_\_  
Miramar, FL. 33025 \_\_\_\_\_

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: Technology company, writing programmes and decoding.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES** 500 Shares @\$1:00 per share  
The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Grace W Bassey - President Name and Title: \_\_\_\_\_  
Address 2577 SW 120 Avenue Address: \_\_\_\_\_  
Miramar, FL. 33025 \_\_\_\_\_

Name and Title: Arit Bassey - CEO Name and Title: \_\_\_\_\_  
Address 2577 SW 120 Avenue Address: \_\_\_\_\_  
Miramar, FL. 33025 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_

17 SEP 14 AM 9:14  
MAIL ROOM  
TALLAHASSEE FLORIDA

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: Charles Inije  
 Address: 1175 NE 125th Street  
 Miami, FL, 33161

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Grace W Bassey  
 Address: 2577 SW 120 Avenue  
 Miramar, FL, 33025

FALL 2017 STATE  
 17 SEP 16 AM 9:14  
 FLORIDA

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 09/01/2017. (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 09/05/2017  
 \_\_\_\_\_  
 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 09/05/2017  
 \_\_\_\_\_  
 Date