Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Fax Number : (954)420-7118

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YNFO@TAXSPRO.COM

FLORIDA PROFIT/NON PROFIT CORPORATION INVERSIONES GABB CORP

FP21 PMI2:10

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COVER LETTER

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

SUBJECT:	INVERSIONES GABB CORP
_	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for.

3 \$70.00 □ \$78.75 Filing Fee Filing Fee

& Certificate of Status

□ \$78.75 ☐ \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy

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				Address
	_			
786-3072733				
Daytime Telephone number				
	INFO@TAXSPRO.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)

The name of the corpor	Enation shall be: INVERSION	ONES GABB (CORP
ARTICLE II PRIN	Principal street address 9 ST , APT 24	_	Idress, if different is:
	MIAMI, FL 33135		FL 33135
ARTICLE III PURI			
ANY AND A	LL LAWFUL BUSINESS		
ARTICLE IV SHA. The number of shares of		<u> </u>	
	PRESIDENT		
Address	GABB MEZA , CAR	LA ADELA	
	2/4/ OFF A DE		
	3636 SW 9 ST, AP MIAMI, FL 33135	<u> </u>	
	——————————————————————————————————————	Name and Title:	
Address		Address:	
			7002 FALL
		·	2022 SEP
Name and Titl	c:	Name and Title:	
Address		Address:	
		-	PH ==
			<u>. 5</u>

To: +18506176381

Name and	Title:	Name and Title:	
Address		Address:	
	EGISTERED AGENT		
The Daine and Flor	rida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	TAX S PRO CORP		
Address:	8030 PINES BLVD		
	PEMBROKE PINES, FL 33024	•	
<u>ARTICLE VII </u>	NCORPORATOR		
	ress of the Incorporator is:		
Address:	TAX S PRO CORP		
Addiess.	8030 PINES BLVD PEMBROKE PINES , FL 33024		
Effective date, if of (If an effective dat filling.) Note: If the date it	ther than the date of filing: the is listed, the date must be specific and cannot asserted in this block does not meet the applicable active date on the Department of State's records.		
	d as registered agent to accept service of process fo niliar with and accept the appointment as register		
			09/21/2023
	Required Signature/Registered Agent		Date
document to the De	nent and affirm that the facts stated herein are partment of state constitutes a third degree felony	true. I am aware that the false in as provided for in s.817.155, F.S	nformation submitted in a
Required Signature	Incorporated	Date	P 21
			PK 1: 55