

TRANSMITTAL LETTER

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

SUBJECT: Joseph M. Albury, P.A.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

400004651764--1
-10/24/01--01038--024
*****87.50 *****87.50

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: Joseph M. Albury, Esq.
Name (Printed or typed)

1115 Catherine Street
Address

Key West, FL 33040
City, State & Zip

(305) 304-5813
Daytime Telephone number

FILED
01 OCT 24 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Ps, 10/24/01

ARTICLES OF INCORPORATION

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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Joseph M. Albury, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

309 Whitehead Street
Key West, FL 33040

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Attorney

ARTICLE IV SHARES

The number of shares of stock is:

~~100~~ 1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Joseph M. Albury, Esq.
1115 Catherine Street
Key West, FL 33040
President

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Joseph M. Albury, Esq.
~~1115 Catherine Street~~ 309 Whitehead Street
Key West, FL 33040

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joseph M. Albury, Esq.
1115 Catherine St.
Key West, FL 33040

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

Date

Signature/Incorporator

Date