

PO9000017115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

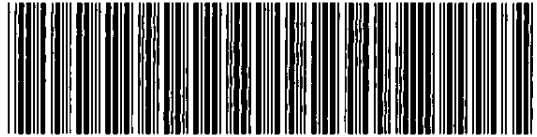
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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02/23/09--01038--023 **78.75

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09 FEB 23 PM 12:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: ALBERT OWENS ENTERPRISES, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: ALBERT OWENS
Name (Printed or typed)

14180 NW 22ND AVE APT 3
Address

OPA LOCKA, FL 33054-4149
City, State & Zip

305-681-2542
Daytime Telephone number

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:

ALBERT OWENS ENTERPRISES, INC

ARTICLE II PRINCIPAL OFFICE

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

14180 NW 22ND AVE APT 3, OPA LOCKA , FL 33054-4149

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RETAIL GOODS AND SERVICES ONLINE AND STORE FRONT

ARTICLE IV SHARES

The number of shares of stock is:

100 PERCENT OWNERSHIP

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

VICE PRESIDENT
FREDERICK OWENS
1007 TANNER DRIVE
TALLAHASSEE, FL 32305

ARTICLE VI REGISTERED AGENT

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

YVONNE OWENS
19111 NW 42ND COURT
MIAMI, FL 33055

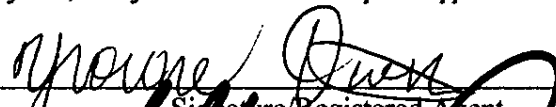
ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

ALBERT OWENS
14180 NW 22ND AVE APT 3
OPA LOCKA, FL 3054

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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


Signature/Incorporator

2/18/09

Date
2/18/09

Date