

PI10000049575

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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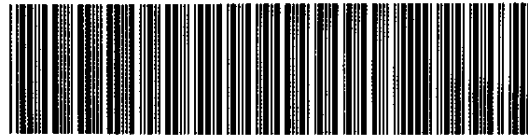
(Business Entity Name)

(Document Number)

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

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2011 MAY 24 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SC 5/27

## COVER LETTER

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

**SUBJECT:** Julius Albert, 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:** James E. Carey

Name (Printed or typed)

5678 Old Savannah Rd.

Address

Midville, GA 30441

City, State & Zip

478-494-7304

Daytime Telephone number

jimcarey@engineer.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FL 32310

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

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

**ARTICLE I NAME**

Julius Albert, Inc.

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1212 Georgia St.  
Key West, FL 33040

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Any legal business purpose.

**ARTICLE IV SHARES 10,000**

The number of shares of stock is:

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

Name and Title: Julius A. Williams, President  
Address: 220 Sussex Ct  
Roswell, GA 30075

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

Name and Title: James E. Carey, Secretary/Treasurer  
Address: 5678 Old Savannah Rd  
Midville, GA 30441

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

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

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

**ARTICLE VI REGISTERED AGENT**

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

Name: John R. Collins  
Address: 1212 Georgia St.  
Key West, FL 33040

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: James E. Carey  
Address: 5678 Old Savannah Rd.  
Midville, GA 30441

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TALLAHASSEE FL 32301

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

5/18/2011  
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

5/12/11  
Date