P110008/656

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SECRETARY OF STATE DIVISION OF CORPORATIONS

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COVER LETTER

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

SUBJECT: Achieve Accountability, 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 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
	ADDITIONAL CO	DPY REQUIRED			
		de la			
FROM: Julianne Gill Name (Printed or typed)					
3842 Brampton Island Ct	•				
Jacksonville, FL 32224 City, State & Zip					
904-742-9814	lephone number				
juliegill2308@hotmail.cor E-mail address: (to be used	n for future annual report	notification)			

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the co	NAME Achieve Accountability, If reportation shall be:	NC	
ARTICLE II	PRINCIPAL OFFICE		
,	Principal street address	Mailing add	ress, if different is:
	842 Brampton Island Ct N		
لد	acksonville, FL 32224		
ARTICLE III	PURPOSE		
	hich the corporation is organized is:		
	pokkeeping services, including the pre	paration of books of a	ccount, balance sheets
	Loss Statements. To preform payroll		
services, incl	uding the preparation of tax returns. To	preform any and all	services directly or
	ted to Bookkeeping, Tax Services and		•
ARTICLE IV	CHADDC		
	es of stock is: 100		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS		
	tle:Julianne Gill, President/CEO		
Address:	3842 Brampton Island Ct N	Address:	
	Jacksonville, FL 32224		
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Name and Ti	tle: Timothy J. Gill, Vice President	Name and Title:	
Address:	3842 Brampton Island Ct N	Address:	
11221022	Jacksonville, FL 32224		
Name and Ti	tle:	Name and Title:	
Address:			
ARTICLE VI	REGISTERED AGENT		m
The <u>name and Flo</u>	ida street address (P.O. Box NOT acceptable) of the	ne registered agent is:	11
Name:	Julianne Gill		Se Se
Address:	3842 Brampton Island Ct N		~ ≥ ≈
	Jacksonville, FL 32224		5 %≥:
ARTICLE VII	INCORPORATOR		_ 84
The name and add	ress of the Incorporator is:		3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Name:	Julianne Gill		PORATI
Address:	3842 Brampton Island Ct N		PORATIC MIO: 39
	Jacksonville, FL 32224		9
	d as registered agent to accept service of process j		
this certificate, I ar	n familiar with and accept the appointment as regist	tered agent and agree to act i	in this capacity
	Julian na Mil		9/13/2011
	Required Signature/Registered Agent		Date
l suhmit this door	ment and affirm that the facts stated herein are to	nie I am awase that the fal	se information submitted in a
	ment and affirm that the facts stated hereth are to partment of State constitutes a third degree felony (
		· · · · · · · · · · · · · · · · · · ·	- /
(,	Juliane Stil		9/13/2011
	Required Signature/Incorporator		Date