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Section 1

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## **COVER LETTER**

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

<sub>SUBJECT:</sub> Proje	ct Capes Inc.	E NAME – MUST INCL	UDE SUFFIX)	_
	(		`	
Enclosed is an original	and one (1) copy of the Artic	les of Incorporation and	d 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	
		ADDITIONAL C	OPY REQUIRED	
FROM:	Gary Schubert Name (Prin	nted or typed)	_	
	6619 Crestmont (	Glen Ln	<del></del>	
	Windermere, FL 3	34786 late & Zip	_ <b>X</b> a	2011
	402-689-1217 6619 CreRestime (Eal	enhone number	AHASS	2011 MAY - 3
	wilsonstuka@ya	ahoo.com 🗸	00 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	e II

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

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the co	NAME Project Capes Inc.	EIN	:90-0703010		
ARTICLE II	PRINCIPAL OFFICE				
	Principal street address		Mailing address, if different is:		
	6619 Crestmont Glen Ln.	_	7777 West Mcdowell Rd. #1071		
	Windermere, FL 34786	_	Phoenix, AZ 85035		
		_			
ARTICLE III	PURPOSE				
	hich the corporation is organized is:				
make informed cho be served by show legitimate and exce	ring them that the skilled trades, technical trades, onli	nge their lives for ne university as warry men and wor	the better. Young adults leaving high school will also well as the traditional university learning system are all nen will be excellent candidates for our services as the		
ARTICLE IV	MANNER OF ELECTION The manner in v	which the director	rs are elected and appointed:		
Principal Board m	embers Greg Huff, Gary Schubert & Tim Longwell u				
	•	·			
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR		Christopher Cost Baned Momber		
Name and 1 Address:	itle: <u>Gary Schubert- CEO</u> 6619 Crestmont Glen Ln	Name and 11th	e: <u>Christopher Scott- Board Member</u> 14911 Lake Street		
Address:	Windermere, FL. 34786	Address:	Omaha, Ne. 68116		
	7411dO:111010,11 E. 04100	•	Offiana, 14e, 00110		
	Total Control Make and Control	•			
Name and T	itle:Greg Huff-President & Treasurer		e: Pat O'Malley- Board Member		
Address:	7777 West Mcdowell Rd. +107	Address:	254 No. 114th street		
	Phoenix, AZ 85035	•	Omaha, NE 68154		
		•			
Name and T	itle: Timothy J. Longwell- VP & Director of Marketing	Name and Title	e: Renee Mitchell- Education Divector 22024 Meadow view PKW Council Bluffs, IA 51503		
Address:	37 Ginger Cove Rd	Address:	22024 Meadre view PKIN		
	Valley, Ne. 68064	, 1144,14051	Council Bluffs. IA 51503		
ARTICLE VI	REGISTERED AGENT				
Name:	rida street address (P.O. Box NOT acceptable) of Gary Schubert- Project Capes Inc.		ent is:		
Address:	6619 Crestmont Glen LN		型. 2		
Address.	Windermere, FL 34786	•			
	TTHOUGHT COTTON		A SECONDARIA TO A SECONDARIA T		
			<b>39 3</b>		
ARTICLE VII	<u>INCORPORATOR</u>		<b>φ</b> ω Γ		
	Iress of the Incorporator is:		المعتبدة الم		
Name:	Gary Schubert- Project Capes Inc.				
Address:	6619 Crestmont Glen LN		grown Con-		
	Windermere, FL 34786		22.		
			<u> </u>		
Having been nart	ed as registered agent to accept service of proces	s for the above	stated corporation at the place designated in this		
certificate, Lan fai	miliar with grid accept the appointment as registere	d agent and agre	ee to act in this capacity		
Lonin	The second		$\mathcal{A}$		
/ [[][]	XVIILENT / LANG	Schubert	1 4/2///		
	Required Signature of Registered Agent		Date		
-/\			,		
I submit this document and affirm that the facts stated herein are true. I am aware that any 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.					
( Im	A ball	016	1 4/2///		
7/11/1	Chry	Mubled	7/2///		
/ / //	Required Signature of Incorporator		/ Date		