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2017

Department of State
Division of Corporation
P. O. Box 6327
Tallahassee

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17 MAY -1 AM 11:50
TALLAHASSEE

April 25, 2017

To Whom It May Concern:

Please see attached information Community Project Elevation Inc. Please send all correspondence to:

Mr. Niamke Etchene
4514 Wishart Blvd
Tampa, Florida 33603

Please also amount request attached propose document.

We look forward to hearing from you at your earliest convenient.

Sincerely,


NIAMKE ETCHENE

Department of State
Division of Corporation
P. O. Box 6327
Tallahassee

**SUBJECT: COMMUNITY PROJECT ELEVATION INC
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX**

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

\$70.000
Filing Fee

\$78.75
Filing Fee &
Certified Copy

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certifies Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM

Emmanuel A. Akah
Name (Printed or type

1607 Southwind Drive
Address

Brandon Florida 33510

City, State & ZIP
(720) 496-9574

Daytime Telephone number

manny119@hotmail.com

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

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

ARTICLE OF INCORPORATION

In compliance with Chapter 617, F.S.; (NOT FOR Profit)

ARTICLE 1 NAME

The name of the corporation shall be: **COMMUNITY PROJECT ELEVATION INC**

ARTICLE 11 PRINCIPALE OFFICE

Principal Street Address:

1607 Southwind Drive
Brandon, Florida, 33510

Mailing address, if different is:

ARTICLES 111 PURPOSE

The purpose for which the corporation is organized is:

COMMUNITY PROJECT ELEVATION INC will provide Veteran Assisted Living Home, Youth Group Home and outreach children, young Adolescence age from 13 through 22. To provide them workforce readiness and their families counseling and educational services. Community Project Elevation Inc will assist foster youth and runaway youth boys and girls between 13-22 years of age with different locations. The program is also a nontraditional foster care that serves children and adolescents who are temporarily unable to live with their biological or non-biological families.

It is a comprehensive community program helping youth with special behavioral and emotional needs, which promotes success in a traditional foster home. Positive youth development is a policy perspective that emphasizes providing services and opportunities to support Adults, and all kids- from 13-22 young people in developing a sense of competence, usefulness, belonging and empowerment. Community Project Elevation Inc will provide youth development activities or services. The approach works, best when entire communities, including young people, are involved in creating a continuum of services and opportunities that both adults and kids need to grow into happy and healthy adults. The organization will provide accommodation for homeless veterans, dependency court adolescence and runaway youth with assisted living facility.

ARTICLES IV SHARES

The number of shares of stock is: The organization shall issue **NO SHARES** of any kind, and shall be a "**Not Profit**" organization as prescribed by the CERTIFICATE OF INCORPORATION. However, the Incorporator/President shall appoint the initial Board of Directors. Each director shall serve a four-year term or eight. In case of a resignation by any director before his/her four-year term, the incorporator/president shall appoint his/her successor. The incorporator/President shall forward future candidate's names to every board member and other elected officials at a meeting—who shall elect new members to the board.

ARTICLES V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Emmanuel A. Akah, President &CEO

Andre Wray, Vice President/DP

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CLERK OF COURT
HILLSBORO COUNTY, FLORIDA

1607 Southwind Drive
Brandon, Florida, 33510
E-mail address: manny119@hotmail.com

13220 PIKE Lake Drive
Riverview, Florida 33579
awray76@live.com

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** is. (P.O. Box NOT acceptable) of the registered agent
Emmanuel A. Akah

1607 Southwind Drive
Brandon, Florida 33510

ARTICLE VII INCOPORATOR

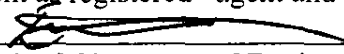
The **name and address** of the Incorporator is:

Niamke J. Etchene
4514 Wishart Blvd
Tampa, Florida 33603

ARTICLE VIII EFFECTIVE DATE:

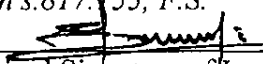
Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days
prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements,
this date will not be listed as the document's effective date on the Department of State's records.
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 of Registered Agent

4/25/17
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.817.55, F.S.*


Required Signature of Incorporator

04/25/17
Date

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