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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

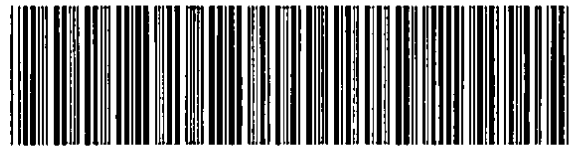
(Business Entity Name)

(Document Number)

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

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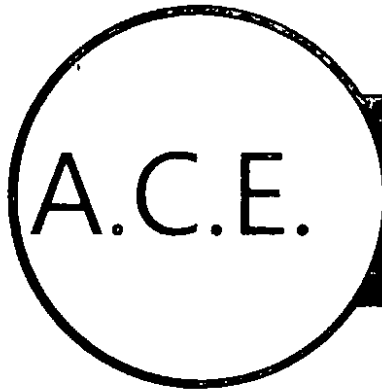
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JUN 18 2019

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Filing Office



**JERRI M. SUTTON**

**ACADEMY FOR CAPACITY AND ENRICHMENT, LLC  
ORIGINATING MEMBER**

## **INTENTION**

**I HAVE DISSOLVED THE ACADEMY FOR CAPACITY AND ENRICHMENT, LLC IN PREPARATION OF FILLING THE ATTACHED ARTICLES OF INCORPORATION FOR THE ACADEMY FOR CAPACITY AND ENRICHMENT, INC.**

**WE HAVE NO INTENTION OF REACTIVATING THE LLC AND EVERY INTENTION OF NOT USING THE NAME FOR A NEW LLC.**

**I HOPE THIS EXPLANATION LETTER IS SUFFICIENT TO ALLOW US TO FILE THESE ARTICLES OF INCORPORATION FOR THE NEW NOT FOR PROFIT STATUS OF THE ACADEMY FOR CAPACITY AND ENRICHMENT, INC.**

**THANK YOU**

**JERRI M. SUTTON**



**JSUTTON@CAMCONHELPS.COM**



**941-916-8661**



**2734 ST. CHARLES STREET,  
FORT MYERS, FL 33916**

## COVER LETTER

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

**SUBJECT:** Academy for Capacity and Enrichment, Inc. (ACE)

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is 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

**ADDITIONAL COPY REQUIRED**

**FROM:** Jerri M. Sutton

\_\_\_\_\_  
Name (Printed or typed)

6174 Gillot Boulevard

\_\_\_\_\_  
Address

Port Charlotte, FL 33981

\_\_\_\_\_  
City, State & Zip

941-916-8661

\_\_\_\_\_  
Daytime Telephone number

jsutton@camconhelps.com

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

**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 NAME**

The name of the corporation shall be: Academy for Capacity and Enrichment, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
2734 St. Charles Street

Fort Myers, FL 33916

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The purpose of this not for profit is to provide capacity building training to individuals in specific employment fields. This corporation will provide educational enrichment - physical, mental, and psychosocial - opportunities to the communities served. Notwithstanding any other provision of these articles, this corporation shall not, except to an insubstantial degree, engage in activities or exercise any powers that are not in furtherance of the purposes of this corporation. Upon the dissolution of ACE, assets shall be distributed for exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code for public purpose. No net earnings of ACE shall inure to the benefit of or distributed to individuals, except that ACE shall be authorized and empowered to pay compensation for services.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: By majority vote.

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

Name and Title: Eeshawanna Matthews, Director

Address: 2734 St. Charles St.  
Fort Myers, FL 33916

Name and Title: Jerri M. Sutton, Director

Address: 6174 Gillot Blvd  
Port Charlotte, FL 33981

Name and Title: Forest Sutton, Director

Address: 1031 James Ave S.  
St. Petersburg, FL 33705

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_

2019 JUN -6 PM 1:03  
FILED

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

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Jerri M. Sutton  
Address: 6174 Gillot Blvd  
Port Charlotte, FL 33981

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jerri M. Sutton  
Address: 6714 Gillot Blvd  
Port Charlotte, FL 33981

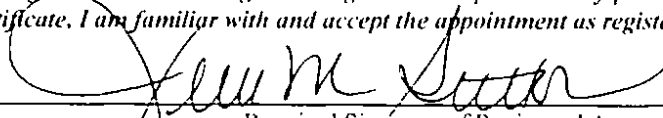
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: June 1, 2019. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

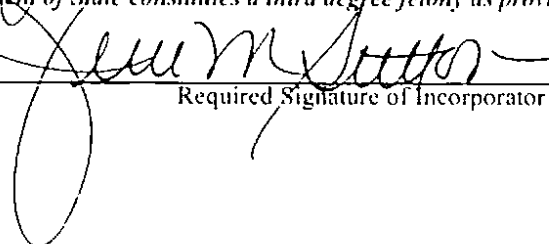
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

May 30, 2019  
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.*

  
Required Signature of Incorporator

May 30, 2019  
Date