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SECRETARY OF STATE

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B Moknight NOV 1 0 2009

COVER LETTER

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

SUBJECT:	Cap Costs Inc.		
 	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:
 ₹70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
FROM:		ey S Gliman e (Printed or typed)	
		twater West Circle Address	
	Арор	ka,Fl 32712 , State & Zip	·
		' 928 1179 Telephone number	
		capcosts.com	
	E-mail address: (to be use	ed for future annual report	notification)

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



November 3, 2009

BRADLEY S GILMAN 1812 SWEETWATER WEST CIRCLE APOPKA, FL 32712

SUBJECT: CAP COSTS INC. Ref. Number: W09000048812

We have received your document for CAP COSTS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2010 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight Regulatory Specialist II New Filing Section

Letter Number: 609A00034654

•	F INCORPORATION h Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I	NAME

The name of the corporation shall be:

Cap Costs Inc.

ARTICLE II	PRINCIPAL OFFICE
The principal stre	et address and mailing address, if different is:
1812 Su	setwater west Circle
Claroka	PURPOSE
ARTICLE III	PURPOSE
The purpose for	which the corporation is organized is:

Consultancy for profit

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Bradley S. Gilman 1812 Sweetwater West Circle, Apopka, Fl 32712 President Susan M. Gilman 1812 Sweetwater West Circle, Apopka, Fl 32712 Vice President

REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Susan M. Gilman 1812 Sweetwater West Circle, Apopka, Fl 32712

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Bradley S. Gilman. 1812 Sweetwater West Circle, Apopka, Fl 32712

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