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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : CORPORATION SERVICE COMPANY  
Account Number : I20000000195  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FOREIGN PROFIT/NONPROFIT CORPORATION  
BINDING COVENANT GROUP INC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$70.00

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

10 MAR 19 PM 4:27

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN FLORIDA

SECRETARY OF STATE TALLAHASSEE, FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. BINDING COVENANT GROUP INC

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. WYOMING

(State or country under the law of which it is incorporated)

3. 27-1624084

(PEI number, if applicable)

4. 12/01/2009

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty-liability)

7. 554 TERRACE SPRING DRIVE ORLANDO, FL. 32828

(Principal office address)

554 TERRACE SPRING DRIVE ORLANDO, FL. 32828

(Current mailing address)

8. BUSINESS MANAGEMENT

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301

(City)

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: [Signature] (Registered agent's signature)

Kimberly B. Moret as its agent

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Sandra Roman

Address: 554 Terrace Spring Drive, Orlando, Fl 32828

Vice Chairman: \_\_\_\_\_

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

Director: Sandra Roman

Address: 554 Terrace Spring Drive, Orlando, Fl 32828

Director: \_\_\_\_\_

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

B. OFFICERS

President: Sandra Roman

Address: 554 Terrace Spring Drive, Orlando, Fl 32828

Vice President: \_\_\_\_\_

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

Secretary: Joseph Glennon, III

Address: 554 Terrace Spring Drive, Orlando, Fl 32828

Treasurer: \_\_\_\_\_

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

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Sandra I. Roman  
(Signature of Director or Officer listed in number 12 of the application)

14. Sandra I. Roman, President  
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**STATE OF WYOMING**  
**Office of the Secretary of State**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

**BINDING COVENANT GROUP INC**  
is a  
**Profit Corporation**

formed or qualified under the laws of Wyoming did on December 1, 2009, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2009-000577306.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 19th day of March, 2010 at 12:42 PM. This certificate is assigned 007268630.



*Max Maxfield*  
Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website <http://wyobiz.wy.gov> and following the instructions displayed under Validate Certificate.