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TRANSMITTAL LETTER

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TO: Registration Section	FILED		
Division of Corporations	2004 APR 15 P 1:30		
SUBJECT: Covenant Property Investments 1, LLC (Name of Limited Liability Company)	SECRETARY OF STATE TALLAHASSEE, FLORIDA		
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the fo	ollowing:		
Robert B. Dunbar (Name of Person)	_ 		
Covenant Property Investments 1, LLC (Firm/Company)			
512 Cypress Way East (Address)	en e		
Naples, FL 34110 (City/State and Zip Code)	······································		
For further information concerning this matter, please call:			
Robert Dunbar at (239) 289-17 (Name of Person) (Area Code & Daytime Teleph	12		

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327 -.. Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

The mailing address	and street address of the	c principai (office of the L	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Ü		• •			
<u>Principal Office Ac</u>	ddress:		Mailing Ad	<u>dress:</u>	
512 Cypress	Way East		same		
Naples, FL	3/110				
Napies, FL	34110	–	· <u></u>		
					· · · · · · · · · · · · · · · · · · ·
	gistered Agent, Registe			d Agent's S	ignature:
	gistered Agent, Registe lorida street address of t			d Agent's S	ignature:
				d Agent's S	ignature:
				d Agent's S	ignature:
The name and the F	lorida street address of t	he registere			ignature:
The name and the F	lorida street address of t	he registere	d agent are:		ignature:
The name and the F	lorida street address of t Cheryl I. Deave Na	ne registere rs me	d agent are:		ignature:
The name and the F	Cheryl L. Deave	he registered rs ame	d agent are:		ignature:
The name and the F	lorida street address of t Cheryl I. Deave Na	he registered rs ame	d agent are:		ignature:
The name and the F	Cheryl I. Deave No. 3920 Via Del Re Florida street address	rs ame y #4 (P.O. Box NC	d agent are: OT acceptable)	-··	ignature:
The name and the F	Cheryl I. Deave No. 3920 Via Del Re Florida street address Bonita Springs,	rs ame y #4 (P.O. Box NC	d agent are: OT acceptable)		ignature:
The name and the F	Cheryl I. Deave No. 3920 Via Del Re Florida street address Bonita Springs,	rs ame y #4 (P.O. Box NC	d agent are: OT acceptable)	-··	ignature:

_

registered agent as provided for in Chapter 608, Florida Statutes..

Cherry Heaves
Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managir The name and address of each Manager of	ng Member(s): or Managing Member is as follows: 2004 APR 14	D 1: 30
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address: SECRETARY TALLAHASSI	/ OE CT/
MGRM	ROBERT B. DUNBAR 312 CUPRESS WAY EAST NAPLES EL 34110	
MGRM	ROBERT ANDERSON 4654 EXECUTIVE DRIVE COLUMBUS OH 43220	
		and a second sec
(Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·	·
NOTE: An additional article must be a	added if an effective date is requested.	
(In accordance with section 608.4	thorized representative of a member. 08(3), Florida Statutes, the execution firmation under the penalties of perjury	
KOSUNT & DUNG	THA ted name of signee	er e e e

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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(Continued)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE IV - EFFECTIVE DATE

The effective date for the Limited Liability Company is:

April 12, 2004

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SECRETARY OF STATE TALLAHASSEE, FLORIDĄ

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