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SECRETANT STATE
TALLAHASSEE, FLORIDA

N. Culligan JUN 2 4 7005

# TRANSMITTAL LETTER

	ion Section of Corporations					
Subject:	Covenant C	<u>onstructio</u>	n, LLC			
•	Name of Li	mited Liab	ility Comp	any)		
The enclosed Ar	ticles of Organization	and fee(s)	are submi	tted for filing.		
Please r	eturn all corresponder	nce concern	ning this m	atter to the follo	owing:	
		e A. Tucke lame of Pe				
		ecounting Sirm/Comp		<u>.C</u>	SEC TALL	05 ر
1234 Airpo (Add						05 JUN 20 AM 11: 38
Destin, FL 32541 (City/State and Zip Code)					LAHASSEE, FLORIDA	II: 38
For further information	mation concerning thi	s matter, p	lease call:			
	Wildes f Person)	at	850-30	1-3579 & Daytime Phor	ne Number)	<del></del>
(Name o	11 (15011)	(1)	ica Couc e	z Dayiilic i iloi	ne rumber)	
	ADDRESS:			MAILING AI Registration Se		
Registration Section Division of Corporations			Division of Corporations			
409 E. Gaines Street			P.O. Box 6327			

Tallahassee, Florida 32314

Tallahassee, Florida 32399

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is: Covenant Construction, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

## **Principal Office Address:**

**Mailing Address:** 

512 Thornhill Rd Fort Walton Beach, FL 32547 512 Thornhill Rd Fort Walton Beach, FL 32547

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature The name and the Florida street address of the registered agent are:

Keith Wildes Name

512 Thornhill Rd Florida street address (P.O. Box NOT acceptable)

> Fort Walton Beach, FL 32547 City, State, and Zip

05 JUN 20 AM 11: 38
SECKELAKI OF SLATE
TAILAHASSEE, FLORID

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as registered agent as provided for in Chapter 608, Florida Statutes.

Registered Agent's Signature

Page 1 of 2

# (CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" - Manager

"MGRM" - Managing Member

**MGRM** 

Keith Wildes
512 Thornhill Rd
Fort Walton Beach, FL 32547

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Keith Wildes

Typed or printed name of signee

Page 2 of 2

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05 JUN 20 AM 11: 38

SECRETANT OF STATE