TRANSMITTAL LETTER

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

*****78.75 *****78.75

| SUBJECT: | Covenant | Academy, | Inc. | |
|----------|----------|-------------|--------|------------------------|
| | (PROPOSE | D 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 &

□\$78.75 Filing Fee \$87.50

Filing Fee, & Certified Copy

Certificate of

Certified Copy & Certificate

Status

ADDITIONAL COPY REQUIRED

| FROM: | Name (Printed or typed) | | | | |
|-------|-----------------------------|--|--|--|--|
| | | | | | |
| | | | | | |
| _ | 5130 Coquina Key Drive S.E. | | | | |
| _ | Address | | | | |
| | | | | | |
| | | | | | |
| | St. Petersburg, FL 33705 | | | | |
| | City, State & Zip | | | | |
| | | | | | |
| | (| | | | |
| _ | (727) 823-7422 | | | | |
| | Daytime Telephone number | | | | |

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:

COVENANT ACADEMY. INC.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

SECRETART OF STATE TALLAHASSEE, FLORIDA

4201 Sixth Street South St. Petersburg, FL 33705

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To operate a church affiliated, private school, for children in pre-kindergarten through the sixth grade, and all other lawful business activities.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors are appointed by Dr. Franklin D. Graham, who serves as School Founder and Headmaster.

ARTICLE V INITIAL DIRECTORS OFFICERS

The name(s), address(es) and title(s):

Dr. Franklin D. Graham, President and Secretary

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Dr. Franklin D. Graham

5130 Coquina Key Drive S.E.

St. Petersburg, FL 33705

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. Franklin D. Graham

5130 Coquina Key Drive S.E.

St. Petersburg, FL 33705

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.

Signature/Registered Agent

July 15,

Date

July 15, 2002

Date

Signature/Incorporator