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Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			





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SECRETARY OF STATE OF CORPORATIONS

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COVER LETTER

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

\$70.00

Filing Fee

SUBJECT: Covenant Ministries Center Incorporated
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

\$78.75

Filing Fee

\$87.50

Filing Fee,

Certified Copy & Certificate

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

\$78.75

Filing Fee &

Status	& Certified Copy	Certified Copy & Certificate
·	ADDITIONAL CO	PY REQUIRED
		
_{FROM:} Bonita A. Miller		_
Name ((Printed or typed)	-
13626 Sand Bli	uff Lane	
	Address	_
Grand Island, F	Florida 32735	
City	y, State & Zip	_
352 602-4186		
13626 SandyBiote	Felephone number	_
revbonny@ao	l.com	

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

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

<u>ART</u>	ICLE)	<u> </u>	NAME

15 August 2011 Date

Covenant Ministries Center Incorporated The name of the corporation shall be: 11 AUG 17 AM 11: 03 PRINCIPAL OFFICE ARTICLE II Mailing address, if different is: Principal street address 13626 Sand Bluff Ln Grand Island, FL 32735 ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: To conduct all ministry business; to hold religious services and meetings; to collect tithes/offerings. Dissolution: Upon dissolution all funds and property will be disposed of by their donation to another nonprofit ministry or church as directed by the board. **MANNER OF ELECTION** The manner in which the directors are elected and appointed: By appointment by the President. ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Bonita A. Miller, President Name and Title: 13626 Sand Bluff Ln Address: Address: Grand Island, FL 32735 Name and Title: David C. Miller, Vice President Name and Title:_ Address: 7485 Sunnyside Dr. Address: Leesburg, FL 34748 Name and Title: Roger D. Miller, Secretary/Treasurer Name and Title: Address: Address: 13626 Sand Bluff Ln. Grand Island, FL 2735 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Bonita A. Miller Name: 13626 Sand Bluff Ln. Address: Grand Island, FL 32735. ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Bonita A. Miller Name: Address: 13626 Sand Bluff Ln Grand Island, FL 32735 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, Lam familiar with and accept the appointment as registered agent and agree to act in this capacity 15 August 2011 Required Signature of Registered Agent Date I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document

to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.