

N9900007274

TRANSMITTAL LETTER

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

600003056496--1
-11/30/99--01001--021
*****87.50 *****87.50

SUBJECT: _____
(Proposed 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 &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FILED
99 DEC -9 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM: _____
Name (Printed or typed)

Thomas W. Cullin
8971 NW 33rd. Street
Coral Springs, FL 33065

City, State & Zip

Daytime Telephone number

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

W26736

PV
12/10/99



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

November 30, 1999

THOMAS W CULLIN
8971 NW 33RD ST
CORAL SPRINGS, FL 33065

SUBJECT: COVENANT PROPERTIES, INC.
Ref. Number: W99000026736

We have received your document for COVENANT PROPERTIES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6923.

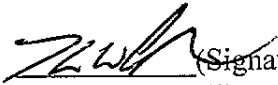
RoseAnn Varnadore
Corporate Specialist Supervisor

Letter Number: 999A00055677

Please Change To
Covenant Homes Inc.

FILED
99 DEC -9 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF
COVENANT HOMES, INC.**

- ONE:** The name of the corporation is COVENANT HOMES, INC.
The address for the principal office is 8971 NW 33rd Street, Coral Springs, Florida 33065. The corporation is pursuant to the FLORIDA Nonprofit Corporation Code.
- TWO:** This corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. The corporation is organized under the Nonprofit Public Benefit Corporation Law for, charitable and educational purposes to aid the poor and disadvantaged individuals and families towards a life of self-sufficiency. The programs will consist of but shall not be limited to: Job Training, Job Placement, Land Acquisition, housing, Employment, Literacy, Counseling, Temporary Shelter, Teenage Pregnancy, Substance Abuse Awareness and Prevention, Tutoring, AIDS, Elderly Care and other programs to aid those in need.
- THREE:** The duration of this corporation shall be perpetual, no stock and shall have no members.
- FOUR:** The name and address of the registered agent of the corporation shall be:
-  (Signature)
Thomas W. Cullin
8971 NW 33rd Street
Coral Springs, FL 33065
- FIVE:**
- (a) This corporation is organized and operated exclusively for Educational and Charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code.
- (b) Notwithstanding any other provision of these Articles, the corporation shall not carry on any other activities not permitted to carry on (1) by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code or (2) by a corporation contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code.

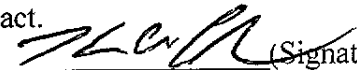
SIX: The Directors are elected in accordance with the Bylaws. A director must be 18 years of age. The number of Directors shall be three (3). The name and address of the persons appointed to act as the initial Directors of this corporation are:

NAME	ADDRESS
Thomas W. Cullin President	8971 NW 33 rd Street Coral Springs, FL 33065
Frank Toscano Secretary	1199 Hillsboro Mile Hillsboro Beach, FL 33062
Michael Lodato Treasurer	915 Tyler Street Hollywood, FL 33025

SEVEN: The property of this corporation is irrevocably dedicated to Charitable and Educational purposes and no part of the net income or assets of the organization shall ever inure to the benefit of any director, officer or member thereof or the benefit of any private person.

EIGHT: On the dissolution or winding up of the corporation, its assets remaining after payment of, or provision for payment of, all debts, and liabilities of this corporation, shall be distributed to a nonprofit fund, foundation, or corporation, which is organized and operated exclusively for, Educational and Charitable under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government for a public purpose. Any such asset not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is located, exclusive for such purposes or to such organization or organizations, as said Court shall determine which are organized and operated exclusively for such purposes.

NINE: Executed on October 10, 1999. The name and address of the incorporator of this corporation shall be, In Witness Whereof, I have signed these articles and acknowledge same to be my act.

 (Signature)
Thomas W. Cullin
8971 NW 33rd Street
Coral Springs, FL 33065

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA
STATUTES THE UNDERSIGNED CORPORATION, ORGANIZED UNDER
THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING
STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED
AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

COVENANT HOMES _____, INC.

(must include suffix)

2. The name and address of the registered agent and office is:

Thomas W. Cullin

(NAME)

8971 NW 33rd Street

(P.O. Box or Mail Drop Box NOT acceptable)

Coral Springs, Florida 33065

(CITY/STATE/ZIP)

*Having been named as registered agent and to accept service of process for the
above stated corporation 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.*

x 
(signature)

x 11/9/99
(Date)

FILED
99 DEC -9 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA