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PICK-UP WAIT MAIL				
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SECRETARY OF STATE
SIVISION OF CORPORATIONS

TRANSMITTAL LETTER

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

SUBJECT: Covenant Maintenance Services, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles 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 of	
		Status ADDITIONAL COPY REQUIRED		
FROM:	Johnny E. Bullar	(Printed or typed)		
-	5214 Plum Ave	Address	<u> </u>	
	Seffner, FL 335	State & Zip		
-	(813) 657-1993 Daytime T	elephone number		

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: Covenant Maintenance Services, Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 5214 Plum Ave. Seffner, FL 33584 ARTICLE III PURPOSE The purpose for which the corporation is organized is: to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Florida; specifically to provide conduct the Corporations business exempt of workers' compensation ARTICLE IV SHARES insurance. The number of shares of stock is: 1,000 of no-par value ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): John E. Bullard, President 5214 Plum Ave. Seffner, FL 33584 REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Johnny E. Bullard 5214 Plum Ave Seffner, FL 33584 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Johnny E. Bullard 5214 Plum Are Seffner, FL 33584 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