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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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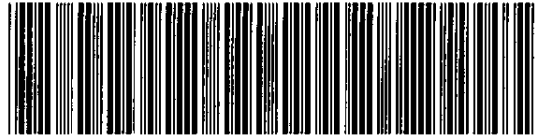
(Business Entity Name)

(Document Number)

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## COVER LETTER

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

**SUBJECT:** COVENANT HEALTHCARE STAFFING, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: NORMA E. ASH

Name (Printed or typed)

4030 LAND O LAKES BLVD. STE. B

Address

LAND O LAKES, FL 34639

City, State & Zip

813-915-0626

Daytime Telephone 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 Healthcare Staffing, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:  
4030 Land O Lakes Blvd., Land O Lakes, Fl. 34639  
5365 School Road, Land O Lakes, Fl. 34638

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Any and all lawful business

### **ARTICLE IV SHARES**

The number of shares of stock is:  
one million

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

PRESIDENT: Jennifer McKinney 3180 Whooping Crane Run, Kissimmee, Fl. 34741  
Vice President: Norma Ash 5365 School Road, Land O Lakes, Fl. 34638  
Director: Danny Ash 5365 School Road, Land O Lakes, Fl. 34638

### **ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Danny Ash 5365 School Road, Land O Lakes, Fl. 34638

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Danny Ash 5365 School Road, Land O Lakes, Fl. 34638

\*\*\*\*\*

*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*

Danny Ash  
Signature/Registered Agent

2-12-2009  
Date

Danny Ash  
Signature/Incorporator

2-12-2009  
Date

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