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COVER LETTER

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

SUBJECT: COMBAT COVERS, 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 \$78.75 Filing Fee & Certificate of Status \$78.75 \$87.50 Filing Fee & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED				
FROM: MICHAEL HILL Name (Printed or typed)				
2801 WATERFORD DR. N AC &				
DEERFIELD BEACH, FL 334623 City, State & Zip				
DEERFIELD BEACH, FL 334620 TO City, State & Zip 770) 652-9669 Daytime Telephone number				
HILL 1480 @ GMAIL, Com F-mail address: (to be used for future annual report positication)				

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)

	ME	
The name of the corpor	ation shall be: COMBAT COVERS IN	C.
2	SOI WATEREADD DE A	ing address, if different is:
	RPOSE the corporation is organized is:	
	GRAPHIC INSTALLATION	
Name and Title:	f stock is: / / / / / / / / / / / / / / / / / / /	
Address: _ - -	2801 WATERFORD DR.N Address: DEERFIELD BEACH, FL 33442	
Name and Title: Address:	Name and Title: Address:	
Name and Title: Address:	Name and Title:Address:	
- ARTICLE VI RE	GISTERED AGENT	
	street address (P.O. Box NOT acceptable) of the registered agent is: MICHAEL HILL 2801 WATERFORD DR. N DEERFIELD BEACH, FL 33442	JAN 3. RETAR AHASS
ARTICLE VII IN	CORPORATOR	me > m
The <u>name and address</u> Name: Address:		AN D. 20
	s registered agent to accept service of process for the above stated of miliar with and accept the appointment as registered agent and agree	
////M	If Ifill	1.23.2012 Date
	Required Signature/Registered Agent	Date
	at and affirm that the facts stated herein are true. I am aware that tment of State constitutes a third degree felony as provided for in s.8	

Date

Required Signature/Incorporator