

P12000031176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

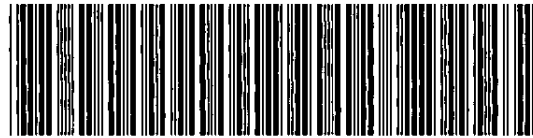
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/02/12--01023--017 **70.00

RECEIVED

12 APR -2 PM 1:31

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

12 APR -2 PM 1:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS 4/2/12

COVER LETTER

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

SUBJECT: COVENANT BUILDING CORPORATION
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

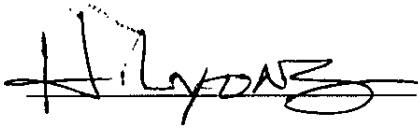
☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: HAROLD LYONS
Name (Printed or typed)
3240 LORD MURPHY TRAIL
Address
TALL, FL 32309
City, State & Zip
9250-284-0128
Daytime Telephone number
COVENANTBUILDING@YAHOO.COM
E-mail address: (to be used for future annual report notification)

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

I have no intention of reinstating Covenant Corporation administratively dissolved
9/23/11 releasing the name for the new corporation.

A handwritten signature in black ink, appearing to read "Hilary", written over a horizontal line.

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 BUILDING CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

3240 LORD MURPHY TRL
TALL, FL 32309

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CONSTRUCTION FIRM

ARTICLE IV SHARES

The number of shares of stock is: 100.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HAROLD LYONS PRESIDENT

Address: 3240 LORD MURPHY TRL

Name and Title: JAMON LYONS (V.P.)

Address: 3240 LORD MURPHY TRL

Name and Title: CHESIE LYONS (SEC. & TREASURER)

Address: 3240 LORD MURPHY TRL

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: HAROLD LYONS

Address: 3240 LORD MURPHY TRL

TALL FL 32309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: HAROLD LYONS

Address: 3240 LORD MURPHY TRL

TALL, FL 32309

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

H. LYONS

Required Signature/Registered Agent

4/2/12

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

H. LYONS

Required Signature/Incorporator

4/2/12

Date

FILED
12 APR - 2 PM 1:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA