

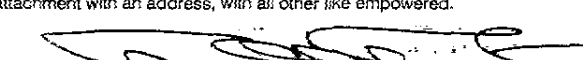


FILED
Jan 30, 2004 08:00 AM
Secretary of State

<div style="display: flex; justify-content: space-between;"><div>DOCUMENT # P97000060572 1. Entity Name COVENANT INVESTMENT CORP.</div><div style="text-align: center;"></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>Principal Place of Business 1304 W. FAIRBANKS AVE. WINTER PARK, FL 32789</div><div>Mailing Address 1304 W. FAIRBANKS AVE. WINTER PARK, FL 32789</div></div>		<div style="display: flex; justify-content: space-between; align-items: center;"><div>Jan 30, 2004 08:00 AM</div><div>Secretary of State</div></div> <div style="text-align: center; margin-top: 20px;"></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;">01122004No Chg-PCR2E034 (10/03)</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>4. FEI Number 59-3455123</div><div>Applied For Not Applicable</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>5. Certificate of Status Desired <input checked="" type="checkbox"/></div><div>\$8.75 Additional Fee Required</div></div>
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ALLY, ARTHUR D 1304 W. FAIRBANKS AVE. WINTER PARK, FL 32789	<div style="text-align: center; height: 100px; vertical-align: middle;">DO NOT WRITE IN THIS SPACE</div>	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
<div style="display: flex; justify-content: space-between;"><div>SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable</small></div><div><small>(NOTE: Registered Agent signature required when reinstating)</small></div><div><small>DATE</small></div></div>		
<div style="display: flex; justify-content: space-between;"><div style="width: 30%;">FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</div><div style="width: 40%;">9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees</div><div style="width: 30%;"></div></div>		
10. OFFICERS AND DIRECTORS		
TITLE	PS	
NAME	ALLY, ARTHUR D	
STREET ADDRESS	1304 W. FAIRBANKS AVE.	
CITY-ST-ZIP	WINTER PARK, FL 32789	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
<div style="display: flex; justify-content: space-between;"><div>SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small></div><div><small>Date</small></div><div><small>Daytime Phone #</small></div></div>		