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FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.
CONTACT: LIDIA FERNANDEZ
PHONE: (305)599-0839

ACCT#: 071001002335

FAX #: (305)716-0346

NAME: COVENANT MORTGAGE, INCORPORATED

AUDIT NUMBER.....H98000005242

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..1

PAGES..... 3

CERT. COPIES.....0

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF

CONVENANT MORTGAGE, INCORPORATED

ARTICLE I NAME

The name of the corporation shall be:
CONVENANT MORTGAGE, INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of
this corporation shall be:

2525 SW KENILWORTH STREET
PORT ST LUCIE, FL 34953

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is
authorized to have outstanding at any one time is:

1000 (ONE THOUSAND)

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ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

ROSA HENDERSON

2525 SW KENILWORTH STREET

PORT ST LUCIE, FL 34953

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

ROSA HENDERSON

2525 SW KENILWORTH STREET

PORT ST LUCIE, FL 34953

The undersigned has executed these Articles of
Incorporation this 17TH day of MARCH, 1997

Rosa Henderson

ROSA HENDERSON, Incorporator

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

CONVENANT MORTGAGE, INCORPORATED

2. The name and address of the registered agent and office is:

ROSA HENDERSON

2525 SW KENILWORTH STREET

PORT ST LUCIE, FL 34953

Signature:

Rosa Henderson
PRESIDENT

Title:

MARCH 17, 1998

Date:

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature:

Rosa Henderson

Date: MARCH 17, 1998

Prepared by: Triple Check Income Tax
2506 Delaware Ave.
Ft. Pierce, Fl 34947
(561) 461-5987

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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