

L11000141443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

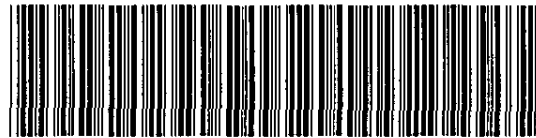
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DEC 16 2011  
**EXAMINER**



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12/16/11--01004--020 \*\*125.00

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TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

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2011 DEC 16 AM 11:09

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CORP DIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

FILED STATE  
SECRETARY OF CORPORATIONS  
11 DEC 16 PM 2:58  
DIVISION OF CORPORATIONS

CONTACT: KATIE WONSCH

DATE: 12/16/2011

REF. #: 000150.158928

CORP. NAME: WOLF CREEK NAPLES HOLDINGS, LLC

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

STATE FEES PREPAID WITH CHECK# 542629 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |   |  |
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| <input type="checkbox"/> CERTIFIED COPY        | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS |   |  |

Examiner's Initials

**ARTICLES OF ORGANIZATION**  
**OF**  
**WOLF CREEK NAPLES HOLDINGS, LLC**

**ARTICLE I - NAME**

The name of the Limited Liability Company is WOLF CREEK NAPLES HOLDINGS, LLC (the "Company").

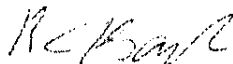
**ARTICLE II - Address**

The mailing office address of the Company is 13440 Parker Commons Blvd., Suite 103, Fort Myers, Florida 33912.

**ARTICLE III - Registered Agent and Office**


The street address of the Corporation's initial registered office is 13440 Parker Commons Blvd., Suite 103, Fort Myers, Florida 33912 and the name of its initial registered agent at such office is Robert S. Barber.

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. Dated this 15<sup>th</sup> day of December, 2011.

  
\_\_\_\_\_  
Robert S. Barber, Authorized Signor

**ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT**

The undersigned, having been named the Registered Agent of the Company hereby accepts such designation and is familiar with, and accepts, the obligations of such position, as provided in Florida Statutes §607.0505.

  
\_\_\_\_\_  
Robert S. Barber  
Dated: December 15, 2011

FILED STATE  
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