

P99 000064622

Requestor's Name

REFERENCE NUMBER

TELEPHONE

941-649-8111

100002604171--4  
-07/31/98--01063--010  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Office Use Only

THOMAS G UNSWORTH, P.A

C 3504 RADIO RD

NUMBER(S), (if known):

NAPLES

FL

34104

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in       Pick up time \_\_\_\_\_       Certified Copy  
 Mail out       Will wait       Photocopy       Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 JUL 21 AM 11:43

FILED

W98-17742

Examiner's Initials  
**N. CULLIGAN**

JUL 21 1999



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

August 21, 1998

THOMAS G. UNSWORTH, P.A.  
3504 RADIO ROAD  
NAPLES, FL 34104

SUBJECT: THE BACK NINE CORPORATION OF NAPLES, INC.  
Ref. Number: W98000017742

We have received your document for THE BACK NINE CORPORATION OF NAPLES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

YOU CAN ONLY LIST (1) CORPORATE SUFFIX IN THE NAME.

If you have any further questions concerning your document, please call (850) 487-6067.

Neysa Culligan  
Document Specialist

Letter Number: 998A00040875

**ARTICLES OF INCORPORATION**  
**OF**  
**WHISKEY DOG HOTEL CORPORATION**

The undersigned, for the purpose of forming a corporation under the Florida Business Corporation Act hereby adopt the following articles of incorporation:

ARTICLE I

NAME

The name of the corporation is **WHISKEY DOG HOTEL CORPORATION**.

ARTICLE II

DURATION

The term of existence of the corporation is perpetual.

ARTICLE III

PURPOSE

The corporation is formed to provide Consulting/Hotel/Resort and to transact any and all lawful business for which corporations may be incorporated under the Florida Business Corporation Act.

ARTICLE IV

CAPITAL STOCK

The aggregate number of shares which the corporation has authority to issue is 7,500, all of which shall be common shares with a par value of \$1.00

ARTICLE V

PRINCIPAL OFFICE, REGISTERED OFFICE & MAILING ADDRESS

The principal place of business, and mailing address of the corporation is 433 Country Hollow Court C-105, Naples, Florida 34104-6022. The name of the initial registered agent is Wayne D. Hoss and the registered office is at 433 Country Hollow Court C-105, Naples, Florida 34104-6022. The registered offices' phone number is 941-348-8072.

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TALLAHASSEE, FLORIDA  
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ARTICLE VI

MANAGEMENT

The business of the corporation shall be managed by the stockholders of the corporation rather than by a board of directors.

ARTICLE VII

INCORPORATORS, SUBSCRIBERS, STOCKHOLDERS AND OFFICERS

The initial subscribers, stockholders and officers are:

Wayne D. Hoss President, Treasurer  
433 Country Hollow Court C-105  
Naples, Florida 34104-6022

Yolande H. Hoss Vice President, Secretary  
433 Country Hollow Court C 105  
Naples, Florida 34104-6022

ARTICLE VIII

COMMENCEMENT OF EXISTENCE

The corporation shall be deemed to commence its existence when these Articles are filed with the Office of the Secretary of State, State of Florida.

IN WITNESS WHEREOF, I have subscribed my name this 18 day of

July, 1999.

Wayne D. Hoss  
Wayne D. Hoss, President, Treasurer,

Yolande H. Hoss  
Yolande H. Hoss, Vice President, Secretary,

7/18/99

7/18/99

STATE OF FLORIDA

COUNTY OF Collier

On this \_\_\_\_\_ day of \_\_\_\_\_, 1999, before me personally appeared  
Wayne D. Hoss, Florida Drivers License Number \_\_\_\_\_, and Yolande H.  
Hoss, Florida Drivers License Number \_\_\_\_\_, known to me to be the  
persons whose names are subscribed to the within instrument, and acknowledged that they executed  
the same for the purpose therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

\_\_\_\_\_  
Notary Public  
My Commission Expires:

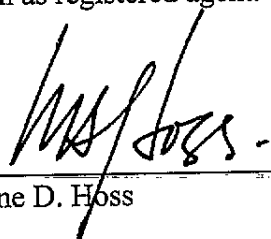
**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHICH PROCESS MAY BE SERVED**

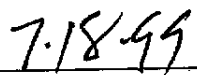
Pursuant to the provisions of section 607.0501 or 617.0501, Florida Statutes, the following is submitted in compliance with said act:

That, desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, in the County of Collier, State of Florida, has named Wayne D. Hoss, located at 433 Country Hollow Court C-105, Naples, Florida 34104-6022, County of COLLIER, State of Florida, as its agent to accept service of process within this State.

**ACKNOWLEDGEMENT**

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 proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
\_\_\_\_\_  
Wayne D. Hoss

  
\_\_\_\_\_  
Date