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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : WARD, DAMON & POSNER, P.A.
Account Number : 072262000447
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FLORIDA PROFIT/NON PROFIT CORPORATION

PAUL TWINING, INC.

Certificate of Status	1
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H06000220544 3

**ARTICLES OF INCORPORATION
OF
PAUL TWINING, INC.**

FILED
06 SEP -5 AM 9:08
TALLAHASSEE, FLORIDA

THE UNDERSIGNED, acting as incorporator of a Corporation under the Florida Professional Service Corporation Act, adopts the following Articles of Incorporation for such Corporation:

ARTICLE I - NAME

The name of this Corporation is: **PAUL TWINING, INC.**

ARTICLE II - DURATION

The duration of this Corporation is perpetual.

ARTICLE III - PURPOSE

The purpose for which this Corporation is organized is to engage in golf related business activities and any other lawful acts or activities for which corporations may be organized under the laws of the State of Florida.

ARTICLE IV - MAILING ADDRESS OF CORPORATION

The mailing address of this Corporation is: 9114 Villa Palma Lane, Palm Beach Gardens, Florida 33418.

H06000220544 3

H06000220544 3

ARTICLE V - STOCK

The aggregate number of shares which this Corporation shall have authority to issue is 5,000 shares of common voting stock with one dollar (\$1.00) par value.

ARTICLE VI - INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of this Corporation's initial registered office in Florida is 9114 Villa Palma Lane, Palm Beach Gardens, Florida 33418, and the name of its initial registered agent at that address is Paul Twining.

ARTICLE VII - INCORPORATOR

The name and address of the incorporator is:


Name

Address

Paul Twining

9114 Villa Palma Lane
Palm Beach Gardens, FL 33418

DATED this 31 day of August, 2006.



Paul Twining, Incorporator

H06000220544 3

H06000220544 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
AND REGISTERED OFFICE

OFFICE OF STATE
TALLAHASSEE, FLORIDA

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ACKNOWLEDGMENT:

Having been named to accept service of process for **PAUL TWINING, INC.**, at the initial registered office of the Corporation in this State designated in its Articles of Incorporation, I hereby accept such appointment and agree to act in this capacity and to comply with the provisions of Section 607.0505 Florida Statutes.

Date: August 7 31, 2006

Paul Twining
Paul Twining

STATE OF FLORIDA)
)ss:
COUNTY OF PALM BEACH)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared **Paul Twining**, to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same for the purposes therein expressed.

31 WITNESS my hand and official seal in the County and State last aforesaid this day of August, 2006.



Conrad Damon
Commission #DD358178
Expires: OCT 31, 2008
Bonded Thru
Atlantic Bonding Co., Inc.

Notary Public

Sign: _____
Print: _____
State of Florida at Large

My Commission Expires:

H06000220544 3