

P16000013032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

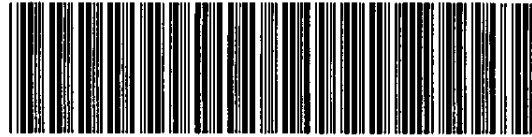
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CLERK OF STATE  
TALLAHASSEE, FLORIDA

16 JAN 29 PM 4:50

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02-09-14  
9

## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** WHISKEYMILLS, INC.  
**(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** WILLIAM D. PHILLIPS JR. & FELICIA A. PHILLIPS  
Name (Printed or typed)

626 RIVERSIDE DRIVE  
Address

HOLLY HILL, FLORIDA 32117  
City, State & Zip

610-334-9112  
Daytime Telephone number

WHISKEYMILLS@ICLOUD.COM  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: WHISKEYMILLS, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

626 RIVERSIDE DRIVE

HOLLY HILL, FLORIDA 32117

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: GENERAL RETAIL SALES

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: WILLIAM D. PHILLIPS JR., PRESIDENT

Name and Title: FELICIA A. PHILLIPS, VICE PRESIDENT

Address 626 RIVERSIDE DRIVE

Address: 626 RIVERSIDE DRIVE

HOLLY HILL, FL 32117

HOLLY HILL, FL 32117

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: FELICIA A. PHILLIPS  
Address: 626 RIVERSIDE DRIVE  
HOLLY HILL, FLORIDA 32117

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TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: WILLIAM D. PHILLIPS, JR  
Address: 626 RIVERSIDE DRIVE  
HOLLY HILL, FLORIDA 32117

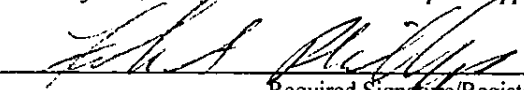
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: JANUARY 25, 2016. (OPTIONAL)

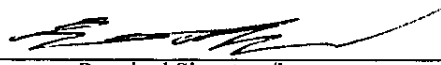
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

 01/25/2016  
Required Signature/Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

 01/25/2016  
Required Signature/Incorporator Date