1960 PM MITAILETTER 7648

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	BIG T	DOG NO			<u> </u>		
	(Propose	d comonite name - must	helude suffix)				
			\	1201947; 714/96-2010 +++78.75	212 77-008 +++*78.75		
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:							
\$70.00 Filing Fee	\$78.75 Filing Fee& Genificate	S122.50 Filing Fee & Certified	Fill Cer		effective date		
		ADDITIO	NAL COPY RE	QUIRED			
FROM	TOT MCit	(Printed or typed) Address State & Zip	3912	96 NOV TOPH 3: 30)		
Daytime Telephone number - 1-5-96							
NOV 1 9 1996 BSB W96-24432		relephone number	DEC 3 M				
NOTE: Please provide the original and one topy of the wirter,							
	-	Part		•			



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 19, 1996

MERYL O'ROURKE 17412 DUQUESNE ROAD FORT MYERS, FL 33912

SUBJECT: BIG DOG, INC. Ref. Number: W96000024432

We have received your document for BIG DOG, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(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 an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6925.

Brenda Baker Corporate Specialist

Letter Number: 696A00052544

ARTICLES OF INCORPORATION

FILED

96 Nov 12 PH 3: 56

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Bush. FLORIDA Corporation Act, hereby adopt(s) the following Articles of Incorporation.

EFFECTIVE BATE

ARTICLE I NAME

The name of the corporation shall be:

Dog FACE , Inc

ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 1216 ESTERO , F1. 33928-1216

ARTICLE III SHARES

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

100 - ndditional Stock may be Authorized by board meetings.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

meryl O'Rourke 17412 DUQUESIVE ROLD FT myers, FI. 33912-2926

INCORPORATOR(S) ARTICLE V See instructions for officers/directors The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are): OCHARIES D. O'ROURKE, JR 17412 DUQUEDRE RE FT. Myers 41 33912 @ MERYI O'ROURKE 17412 DUQUESNE Rd. FT Myess, Fl 33913 ARTICLE VI - escective DATE This corporation shall be effective 11/5/96 ARTICLE VI - FISCAL YEAR. The corporate fiscal year will run JANIST Thru Dec 315T. The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 6 th day of November, 1996. (An additional article must be added if an effective date is requested.)

Notarization is not required

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF 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:	DOB FACE	50 0 TT
2. The name and address of the registe	ered agent and office is:	P. S.
_ wes4/	O'ROURKE (NAME)	CARLEY CORNER
17412 (P.O. Box	OF Mail Drop Box NOT ACCEPTABLE)	
-7-7 m.	1855 - 11. 33912-2926 (CITY)STATEZEP)	

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.

MEER CROWN 11/196 (SIGNATURE) (DATE)