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Office Use Only



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SECKETARY OF STATE DIVISION OF CORPORATIONS

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WOS-4494

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TRANSMITTAL LETTER

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

SUBJECT: C.A.G.E. CORPORATION

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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

	Fee, ed Copy ificate of
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FROM: GREGORY B. LISTOE
Name (Printed or typed)
7103 SUGAR MAGNOLIA CIRCLE
Address
NAPLES, FLORIDA 34109
City, State & Zip
239-593-3881
Daytime Telephone number

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



Glenda E. Hood Secretary of State

January 27, 2005

GREGORY B LISTOE 7103 SUGAR MAGNOLIA CIRCLE NAPLES, FL 34109

SUBJECT: C.A.G.E. CORPORATION

Ref. Number: W05000004494

We have received your document for C.A.G.E. CORPORATION and your check(s) totaling \$78.75. 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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of 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 (850) 245-6931.

Becky McKnight Document Specialist New Filings Section

Letter Number: 205A00005944

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:

C.A.G.E. Management Co.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 7103 SUGAR MAGNOLIA CIRCLE NAPLES, FLORIDA 34109

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

1. TO ADMINISTER A PHYSICIAN'S SCHEDULE, BOOKKEEPING, AND OTHER FUNCTIONS AS DEEMED APPROPRIATE AND LEGAL IN BOTH THE STATE OF FLORIDA AND UNITED STATES OF AMERICA.

2. Real estate investment and management. 3. Investment and business development

ARTICLE IV SHARES

The number of shares of stock is: 1000 SHARES WILL BE AUTHORIZED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): **GREGORY B. LISTOE** 7103 SUGAR MAGNOLIA CIRCLE NAPLES, FLORIDA 34109 President, Secretary, Treasurer

REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: **GREGORY B. LISTOE** 7103 SUGAR MAGNOLIA CIRCLE NAPLES, FLORIDA 34109

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: **GREGORY B. LISTOE** 7103 SUGAR MAGNOLIA CIRCLE NAPLES, FLORIDA 34109

****************	**********
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	ana agree to act in this capacity / /
	1/22/05
Fregory 3. LISTOF Signature/Registered Agent	Date
3//	1/22/06
Signature/Incorporator	Date

Gregory B. LISTOE