

TRANSMITTAL LETTER

D97000073640

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 AUG 18 PM 4: 16

SUBJECT: Caber's, Inc.  
(Proposed corporate name - must include suffix)

EFFECTIVE DATE  
8-14-97

400002270104--5  
-08/18/97--01119--023  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Thomas F. McCabe  
Name (Printed or typed)

5867 Whistlewood Circle  
Address

Sarasota, FL 34232  
City, State & Zip

941-342-1640  
Daytime Telephone number

3  
789,2544,2550  
w/97-19323

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

August 20, 1997

THOMAS F. MCCABE  
5867 WHISTLE WOOD CIRCLE  
SARASOTA, FL 34232

SUBJECT: CABER'S, INC.  
Ref. Number: W97000019323

We have received your document for CABER'S, 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.

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) 487-6972.

Doris Brown  
Document Specialist

Letter Number: 697A00042192

*Doris:*

*I have made the name change  
on these forms. I will call this  
week to verify that the new name  
is OK and get my corporate number.*

*Thank You,  
Tom McCabe*

EFFECTIVE DATE  
8-14-97

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 AUG 18 PM 4:16

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

CaberQue, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

5867 Whistlewood Circle  
Sarasota, FL 34232

### ARTICLE III SHARES

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

1000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Thomas F. McCabe  
5867 Whistlewood Circle  
Sarasota, FL 34232

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Thomas F. McCabe  
5867 Whistlewood Circle  
Sarasota, FL 34232

Thomas F. McCabe

Signature/Incorporator

8-14-97

Date

Article VI Effective Date: 8-14-97

(An additional article must be added if an effective date is requested.)

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

Thomas F. McCabe

Signature/Registered Agent

8-14-97

Date