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GARY L. BUTLER, P.A.

Post Office Box 4575 Seminole, FL 33775 Attorney at Law

March 3, 2022

VIA OVERNIGHT MAIL

Florida Division of Corporations The Centre of Tallahassee 2415 N Monroe St Suite 810 Tallahassee, FL 32303

RE: Articles of Amendment to Articles of Organization for JTS of St. Francis, L.L.C.

Florida Document Number: L20000381091

Dear Sir or Madam:

Enclosed is the Articles of Amendment to Articles of Organization of JTS of St. Francis, L.L.C. ("the LLC") that changes the name of the LLC and changes the address for the LLC's principal place of business.

The LLC is changing its name to "Park Animal Flospital, LLC". The LLC acquired the right to use the name "Park Animal Hospital" from the corporation that previously held a similar name, Park Animal Hospital, Inc., n/k/a Rachel Mac, Inc. (Florida Document Number 604533). The LLC acquired the right to the name as part of the transaction wherein the LLC acquired all of the assets of the former Park Animal Flospital, Inc. Enclosed with this letter is a copy of the Assignment of Right to Name that was executed by the former Park Animal Hospital, Inc. as part of that transaction.

Finally, enclosed is my firm's check in the amount of \$25.00 to cover the filing fee for the Articles of Amendment.

Please let me know if you have any questions concerning this submission or need any further information from me or my client. Thank you for your attention to this matter.

Sincerely yours,

GARY L. BUTLER, P.A.

Gary L. Butler

Encl.

Cc: Jamie Scarpino, DVM

Phone: 727.623.0460 | Fax: 727.214.1204

gary@glbutler.com

ASSIGNMENT OF RIGHT TO NAME

PARK ANIMAL HOSPITAL, INC. ("Park Animal") hereby transfers and assigns to JTS OF ST. FRANCIS, LLC ("JTS") all rights Park Animal has in the corporate name "Park Animal Hospital, Inc.", including any and all common law copyright, trademark, or servicemark rights it may have in the name.

Park Animal agrees that no later than October 15, 2021, it shall file the appropriate documentation with the Florida Department of State, Division of Corporations, to change its name. In furtherance of this Assignment, Park Animal hereby consents to JTS changing its corporate name to "Park Animal Hospital, Inc." or registering "Park Animal Hospital" as a fictitious name. Park Animal therefore requests the Florida Department of State, Division of Corporations to allow JTS to change its corporate name to "Park Animal Hospital, Inc." or to register "Park Animal Hospital" as a fictitious name.

Dated this // day of October, 2021.

PARK ANIMAL HOSPITAL, INC.

By: Rachel McGlamery, as President

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JTS OF ST. FRANCIS, L.L.C. (Name of the Limited)	Liability Compa A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Lia	bility Company	were filed on October 20, 2020	and assigned
Florida document number L20000381091	·		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liab	ility company here:	
Park Animal Hospital, LLC			513
he new name must be distinguishable and contain the wor	rds "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation L.L.C."
Enter new principal offices address, if applical	ble:	8065 66th Street N	- 第
Principal office address MUST BE A STREET	ADDRESS)	Pinellas Park, FL 33781	<u> </u>
			1 4 Table 1
			6. Le
inter new mailing address, if applicable:		N/A	<u> </u>
Mailing address MAY BE A POST OFFICE B	<u>OX)</u>		
If amending the registered agent and/or regent and/or the new registered office address	gistered office	address on our records, enter the n	ame of the new regis
gent and/or the new registered office address	nerę.		
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida street address	
		, Florida	
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Janue L Scarpina	y / cana		
d Jeh 25 . 20. Janua L Scarpina Signature of a member of a	uthorized representa	tive of a member	

Filing Fee: \$25.00