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TRANSMITTAL LETTER

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

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-08/20/02--01061--011
*****78.75 *****78.75

SUBJECT: CHIEFLAND VETERINARY SERVICES, P.A.
(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 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: NANCY E. KICHERER, D.V.M.

Name (Printed or typed)

C/O AL GRAVES
7651 NW 128 LANE

Address

CHIEFLAND, FL 22626

City, State & Zip

(540) 948-3774

Daytime Telephone number

FILED
2002 AUG 20 AM 9:43
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

8/21/02

ARTICLES OF INCORPORATION

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

FILED

2002 AUG 20 AM 9:43

ARTICLE I NAME

The name of the corporation shall be: **CHIEFLAND VETERINARY SERVICES, P.A.** SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

NANCY E. KICHERER, D.V.M.

C/O AL GRAVES

7651 NW 128 LANE

CHIEFLAND, FL 22626

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **THE PROVISION OF VETERINARY SERVICES**

ARTICLE IV SHARES

The number of shares of stock is: **ONE THOUSAND (1,000)**

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

NANCY E. KICHERER, D.V.M., PRESIDENT, SECRETARY & SOLE DIRECTOR

C/O AL GRAVES

7651 NW 128 LANE

CHIEFLAND, FL 22626

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

NANCY E. KICHERER, D.V.M.

C/O AL GRAVES

7651 NW 128 LANE

CHIEFLAND, FL 22626

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NANCY E. KICHERER, D.V.M.,

C/O AL GRAVES

7651 NW 128 LANE

CHIEFLAND, FL 22626

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

Nancy E Kicherer DVM

Signature/Registered Agent

8-9-02

Date

Nancy E Kicherer DVM

Signature/Incorporator

8-9-02

Date