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SECRETARY OF
TALLAHASSEE, FLORIDA
10 JAN 27 AM 8:36

Name chg
@ 1/27/10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: St. Augustine Regional Veterinary Emergency
Clinic, P.A.

DOCUMENT NUMBER: 709000101158

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SIDNEY SIMMONS

Name of Contact Person

Firm/ Company

1050 RIVERSIDE AVENUE

Address

Jacksonville, FL 32204

City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SIDNEY SIMMONS

Name of Contact Person

at (904) 354-9000

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SIDNEY S. SIMMONS

Attorney at Law
1050 RIVERSIDE AVENUE
JACKSONVILLE, FL 32204

SSS@ssimmonsllaw.com

January 25, 2010

TELEPHONE
(904) 354-9000
Ext. 224
TELECOPIER
(904) 354-8860

Ms. Irene Albritton, Regulatory Specialist II
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: St. Augustine Regional Veterinary Emergence Clinic, P.A.
Reference No. P09000101158

Dear Ms. Albritton:

In response to your letter dated January 20, 2010, enclosed please find your office's Cover Letter and Articles of Amendment to Articles of Incorporation for the above referenced corporation to be processed by your office.

If you have any questions, please do not hesitate to call Mr. Simmons.

Sincerely,



Patricia Lazare, Secretary to
Sidney S. Simmons, II

RECEIVED
2010 JAN 27 AM 8:00
Enclosures
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

St. Augustine Regional Veterinary Emergency Clinic, P.A.
(Name of Corporation as currently filed with the Florida Dept. of State)

PO9000101158

(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 JAN 27 AM 8:36

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

St. Augustine Regional Veterinary Emergency Center, P.A. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

_____ (Florida street address)

_____, Florida
(City) (Zip Code)

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 1-10-10
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 1-25-10

Signature Aidney S. Simmons II
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

SIDNEY S. SIMMONS II
(Typed or printed name of person signing)

INCORPORATOR
(Title of person signing)