

P/3000007607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

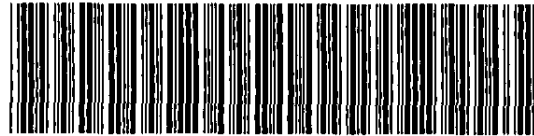
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100243206981

01/17/13--01022--007 \*\*78.75

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2013 JAN 17 AM 11:58  
NOT RECORDED  
TO ALPHABETIC  
SUFFICIENCY OF FILING

FILED  
13 JAN 23 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

WB-3562

K 01/24/13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 18, 2013

EXPRESS CORPORATE FILING SERVICE

SUBJECT: AMERIKA ANIMAL CLINIC CORP.  
Ref. Number: W13000003562

RECEIVED  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2013 JAN 23 AM 10:54  
NOT POSTED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

We have received your document for AMERIKA ANIMAL CLINIC CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

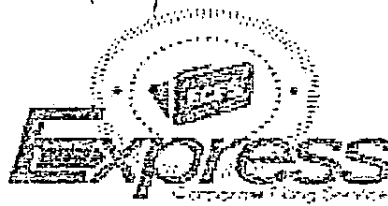
You must list at least one incorporator with a complete business street address.

Please return the corrected 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) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 713A00001434



1000 Ponce de Leon Blvd. Suite: 105  
Coral Gables, FL 33134  
Phone: 305-444-4994  
Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. Amerika Animal Clinic Corp.  
(CORPORATE NAME) (DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME) (DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME) (DOCUMENT #)

☐ Walk-In ☒ Pick up time: \_\_\_\_\_ ☒ Certified Copy ☐ Certificate Of Status

New Filings	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials	
--------------------	--

ARTICLES OF CORPORATION  
OF  
AMERIKA ANIMAL CLINIC CORP.

THE UNDERSIGNED SUBSCRIBER TO THESE ARTICLES OF INCORPORATION, DESIRING TO FORM A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA, DOES HEREBY ACCEPT ALL THE RIGHTS AND PRIVILEGES, BENEFITS AND OBLIGATIONS CONFERRED AND IMPOSED BY SAID LAWS AND DOES HEREBY ADOPT THE FOLLOWING ARTICLES OF INCORPORATION AS THE CHARTER OF THE CORPORATION HEREBY ORGANIZED.

ARTICLE I

NAME

THE NAME OF THE CORPORATION SHALL BE:

AMERIKA ANIMAL CLINIC CORP.

ARTICLE II

DURATION

THIS CORPORATION SHALL HAVE PERPETUAL EXISTENCE, COMMENCING UPON THE FILING OF THESE ARTICLES OF INCORPORATION WITH THE DEPARTMENT OF THE STATE OF FLORIDA.

ARTICLE III

PURPOSE AND POWERS

THIS CORPORATION IS ORGANIZED TO THE PURPOSE OF ENGAGING IN ALL LAW FULL BUSINESS PERMITTED TO A CORPORATION ORGANIZED UNDER THE FLORIDA GENERAL CORPORATION LAW AND THE LAWS OF THE UNITED STATES AND SHALL HAVE ALL THE POWERS SET FORTH IN SAID LAWS.

FILED  
13 JAN 23 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE IV  
CAPITAL STOCK

THE AMOUNT OF CAPITAL STOCK AUTHORIZED SHALL CONSIST OF - 500 -  
SHARES OF COMMON STOCK HAVING A PAR VALUE OF \$ 1.00 PER SHARE  
PAYABLE IN LAWFUL MONEY OF THE UNITED STATES OF AMERICA, OR IN OTHER  
PROPERTY, TANGIBLE OR INTANGIBLE, OR IN LABOR OR SERVICES ACTUALLY  
PERFORMED FOR THE CORPORATION AT A JUST VALUATION TO BE FIXED BY THE  
BOARD OF DIRECTORS OR THE SHAREHOLDERS OF THIS CORPORATION.

THE CAPITAL STOCK OF THE CORPORATION MAY AT ANY TIME BE  
INCREASE OR DECREASE AS PROVIDED BY THE LAWS OF FLORIDA.

ARTICLE V  
INITIAL CAPITAL

THE AMOUNT OF CAPITAL WITH WHICH THIS CORPORATION SHALL BEGIN  
BUSINESS IS NOT LESS THAN FIVE HUNDRED DOLLARS (\$ 500.00)

ARTICLE VI  
INITIAL CORPORATE ADDRESS AND  
INITIAL REGISTERED OFFICE AND AGENT

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION IS:

11865 SW 26 STREET, SUITE B-10, MIAMI, FL 33175

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THIS  
CORPORATION IS:

11865 SW 26 STREET, SUITE B-10, MIAMI, FL 33175

NAME OF THE INITIAL REGISTERED AGENT OF THIS CORPORATION AT  
THAT ADDRESS IS:

AURELIO ROA  
11865 SW 26 STREET, SUITE B-10, MIAMI, FL 33175

FILED  
13 JAN 23 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE VII

INITIAL BOARD OF DIRECTORS

THIS CORPORATION SHALL HAVE DIRECTOR (S) INITIALLY. THE NUMBER OF DIRECTORS MAY BE EITHER INCREASED OR DECREASED FROM TIME TO TIME BY ACTION IN ACCORDANCE WITH THE PROVISIONS OF THE BY - LAWS.

THE NAMES AND ADDRESS OF THE INITIAL DIRECTORS OF THIS CORPORATION ARE:

NAMES	STATUS	ADDRESS
AURELIO ROA	PRESIDENT SECRETARY	11865 SW 26 STREET B-10 MIAMI, FL 33175

ARTICLE VIII

INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR OF THIS CORPORATION IS:

AURELIO ROA  
11865 SW 26 STREET B-10, MIAMI, FL 33175

ARTICLE IX

AMENDMENT

UNLESS OTHERWISE SET FORTH HEREIN, THE CORPORATION RESERVE THE RIGHT, IN ACCORDANCE WITH THE FLORIDA GENERAL CORPORATION LAW, TO AMEND, ALTER MODIFY, OR REPEAL ANY PROVISION OR PROVISIONS, CONTAINED IN THESE ARTICLES OF INCORPORATION, OR ANY AMENDMENT HEREIN, AND ANY RIGHTS CONFERRED UPON THE SHAREHOLDERS IS SUBJECT TO THIS RESERVATION.

FILED  
13 JAN 23 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, THE ABOVE NAMED INCORPORATOR

SUBSCRIBED HIS NAME THIS



ARTICLE X

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to provision of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/ registered agent, in the State of Florida.

The name of the corporation is:

**AMERIKA ANIMAL CLINIC, CORP.**

The name and address of the registered agent and office is

**AURELIO ROA**  
**11865 SW 26 STREET, SUITE B-10, MIAMI, FL 33175**

SIGNATURE

INCORPORATOR

TITLE

PRESIDENT

DATE

1/14/13

**FILED**  
**13 JAN 23 AM 8:17**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE  
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE,  
I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO  
COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE  
PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT  
THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE \_\_\_\_\_

A handwritten signature in black ink, appearing to be "H. H. H.", written over a horizontal line.

DATE \_\_\_\_\_

1/14/13

**FILED**

13 JAN 23 AM 8:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA