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		T. I. Waller
(Re	equestor's Name)	,
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	ne #)
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Letter Number: 505A00053279

FLORIDA DEPARTMENT OF STATE 5 CO - 6 A II: 06 Glenda E. Hood

Secretary of State

August 22, 2005

PETER A. KASAKEVICIUS 5195 NW 80TH AVE. ROAD OCALA, FL 34482

SUBJECT: PETER A. KAZAKEVICIUS, P.S.C.

Ref. Number: W05000039695

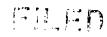
We have received your document for PETER A. KAZAKEVICIUS, P.S.C., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Division of Corporations - P.O. ROX 6327 Tallahassee Florida 32314

TRANSMITTAL LETTER



TO: Registration Section	202 525 -P V VII: 0P			
Division of Corporations	TAILEAN OF A CONTRA			
SUBJECT: PETER A. KAZAKEVICIUS, P.S.C.	THIS IN CONTRACT			
	n - must include suffix)			
	·			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for Au "Certificate of Existence," and check are submitted to reg to transact business in Florida.				
Please return all correspondence concerning this matter	to the following:			
PETER A. KASAKEVICIUS				
(Name of	Person)			
PETER A. KAZAKEVICIUS, P.S.C.				
(Firm/Co	mpany)			
5195 NW 80TH AVENUE ROAD (Addr	ess)			
·	,			
OCALA, FL 34482				
(City/State/	zip cade)			
For further information concerning this matter, please cal	1:			
PETER A. KAZAKEVICIUS at 352-	266-9018			
(Name of Person)	(Area Code & Daytime Telephone Number)			
STREET ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
409 E. Gaines St. Tallahassee, FL 32399	P.O. Box 6327			
- Canadia Gasto, 1 E 02000	Tallahassee, FL 32314			
Enclosed is a check for the following amount:				
X \$70.00 Filing Fee	\$78.75 Filing Fee & \$87.50 Filing Fee,			

Certified Copy

Certificate of Status & Certified Copy

Certificate of Status

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED. REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. PETER A. KAZAKEVICIUS, P.S.C.			2735 SEP -6 A	11: 01
(Enter name of corporation; must include "INCORPORATED," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")	ʻ"cc	MPANY," "CORPORATION,"	TALLAN CONTRACTOR	ORID.
(If name unavailable in Florida, enter alternate corporate na	ame	adopted for the purpose of transact	cting business in Florida)	
2. KENTUCKY	3	61-1198977		
(State or country under the law of which it is incorporated)		(FEI number, if a	pplicable)	
4. 05/01/1991	5	PERPETUAL		
(Date of incorporation)		(Duration: Year corp. will cease	to exist or "perpetual")	
6. 08/01/2005				
(Date first transacted business				
(SEE SECTIONS 607.1501 & 607.15	0UZ,	r.s., to determine penalty liability)		
7. 5195 NW 80TH AVENUE ROAD				
(Principal o	ffice	address)		
OCALA, FL 34482				
(Current ma	ailing	address)		
8. VETERINARY MEDICINE				
(Purpose(s) of corporation authorized in home state of	or co	untry to be carried out in state of Fk	orida)	
Name and <u>street address</u> of Florida registered agent: (P	.O. I	Box NOT acceptable)		
Name: PETER A. KAZAKEVICIUS				
Home. Parak A. Razake VIO200		_		
Office Address: 5195 NW 80TH AVENUE ROAD	_	<u> </u>		
OCALA		_ , Florida 34482		
(City)		(Zip code)	-	
Registered agent's acceptance:				

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.

> 8/16/OT X (Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice Chairman: CINDY KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Director: Address: B. OFFICERS President: PETER A. KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: Secretary: Address: Tressurer: CINDY KAZAKEVICIUS	A. DIREC	CTORS	enside M. M. C. CO. 67705
OCALA, FL 34482 Vice Chairman: CINDY KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Director: Address: B. OFFICERS President: PETER A. KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: Secretary: Address: CINDY KAZAKEVICIUS	Chairman	PETER A. KAZAKEVICIUS	
OCALA, FL 34482 Vice Chairman: CINDY KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Director: Address: B. OFFICERS President: PETER A. KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: Secretary: Address: CINDY KAZAKEVICIUS	Address:	5195 NW 80TH AVENUE ROAD	- 1655 127 = b A H: 0b
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Director: Address: Director: Address: B. OFFICERS President: PETER A. KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: Secretary: Address: Treasurer: CINDY KAZAKEVICIUS	Address:	5195 NW 80TH AVENUE ROAD	
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B. OFFICERS President: PETER A. KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: Secretary: Address: Treasurer: CINDY KAZAKEVICIUS	Address:		
B. OFFICERS President: PETER A. KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: Secretary: Address: Treasurer: CINDY KAZAKEVICIUS			
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B. OFFICERS President: PETER A. KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: Secretary: Address: Treasurer: CINDY KAZAKEVICIUS	Address:		
President: PETER A. KAZAKEVICIUS Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President:			
Address: 5195 NW 80TH AVENUE ROAD OCALA, FL 34482 Vice President: Address: Secretary: Address: Treasurer: CINDY KAZAKEVICIUS	B. OFFIC	ERS	
OCALA, FL 34482 Vice President: Address: Secretary: Address: Treasurer: CINDY KAZAKEVICIUS	President:	PETER A. KAZAKEVICIUS	A distribution of the state of
Vice President: Address: Secretary: Address: Treasurer: CINDY KAZAKEVICIUS	Address:	5195 NW 80TH AVENUE ROAD	
Address: Secretary: Address: Treasurer: CINDY KAZAKEVICIUS	,	OCALA, FL 34482	
Secretary: Address: Treasurer: CINDY KAZAKEVICIUS	Vice Presi	dent:	
Address:	Address:		
Address:			
Treasurer CINDY KAZAKEVICIUS	Secretary:		
	Address:		
Address: 5195 NW 80TH AVENUE ROAD	Treasurer:	CINDY KAZAKEVICIUS	
	Address: _	5195 NW 80TH AVENUE ROAD	
OCALA, FL 34482 NOTE: If necessary, you may attack an addendum to the application listing additional officers and/or directors.			officers and/or directors.
13. Cinda Korakeirana	13.	indu Korakeirenia)	X
(Signature of Director or Officer listed in number 12 of the application)		(Signature of Director or Officer listed in number 12 of the	application)
14. PETER A. KAZAKEVICIUS (Typed or printed name and capacity of person signing application)	14. PET		application)

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Commonwealth of Kentucky Trey Grayson Secretary of State

Certificate of Existence

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

PETER A. KAZAKEVICIUS, P.S.C.

is a professional service corporation duly organized and existing under KRS Chapter 274, whose date of incorporation is May 7, 1991 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 274.105 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 29th day of July, 2005.

Certificate Number: 18112 Jurisdiction: State of Florida

Visit http://apps.sos.ky.gov/business/obdb/certvalidate.aspx_to_validate the authenticity of this

certificate.



Trey Grayson

Secretary of State
Commonwealth of Kentucky
18112/0286125