

LD6000085577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

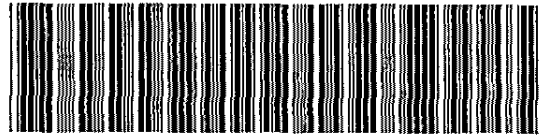
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

[Handwritten signature]

Office Use Only



300078983613

08/30/06--01003--024 **125.00

RECEIVED

06 AUG 30 AM 11:13

FLORIDA

FILED

06 AUG 30 PM 2:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, Fl 32308

City/St/Zip

850-222-2785

Phone #

FILED
06 AUG 30 PM 2:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- MARK S. DEGROVE, D.V.M., P.L.

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF ORGANIZATION OF
MARK S. DeGROVE, D.V.M., P.L.

ARTICLE I
NAME AND PRINCIPAL PLACE OF BUSINESS

The name of this professional limited liability company shall be MARK S. DeGROVE D.V.M., P.L. and the mailing address and street address of its principal office shall be 992 Tamiami Trail, Port Charlotte, FL 33953, but it shall have the power and authority to establish branch offices at any other place or places as the members may designate.

ARTICLE II
PURPOSES AND POWERS

This professional limited liability company is organized for the sole purpose of rendering veterinary services under Chapter 474, Florida Statutes, and pursuant to the Florida "Professional Service Corporation and Limited Liability Company Act."

ARTICLE III
MANAGEMENT AND MEMBERS

A. Manager. The professional limited liability company is to be managed by a manager and the name and address of such manager who is to serve is:

<u>NAME</u>	<u>ADDRESS</u>
-------------	----------------

MARK S. DeGROVE, D.V.M	992 Tamiami Trail Port Charlotte, FL 33953
------------------------	---

The Manager has the authority to bind the PL in the ordinary course of its business.

B. Members. The initial member of the PL will be:

<u>NAME</u>	<u>ADDRESS</u>
-------------	----------------

MARK S. DeGROVE, D.V.M.	992 Tamiami Trail Port Charlotte, FL 33953
-------------------------	---

Instruments and documents for the acquisition, mortgage, disposition, conveyance, lease, sale or transfer of the personal property or real property of this professional limited liability company may be executed on its behalf by its Manager.

ARTICLE IV
MEMBERSHIP RESTRICTIONS

Members shall have the right to admit new members by unanimous consent, provided a new Member is a professional corporation or limited liability company, or an individual, each of

06 AUG 30 PM 2:54
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

which must be duly licensed to render the same specific professional services as those for which this professional limited liability company is organized.

ARTICLE V
DURATION

This professional limited liability company shall exist perpetually or until dissolved in a manner provided by law, or as provided in the regulations adopted by the members and shall commence its existence upon filing of these Articles.

ARTICLE VI
AMENDMENT

These Articles may be amended by a vote of a majority in interest of the members.

ARTICLE VII
INITIAL REGISTERED OFFICE

The street address of the initial registered office of this professional limited liability company is 992 Tamiami Trail, Port Charlotte, FL 33953.

ARTICLE VIII
INITIAL REGISTERED AGENT

The name and street address of the company's initial registered agent for service of process is:

<u>NAME</u>	<u>ADDRESS</u>
-------------	----------------

DAVID E. OLMSTED

17801 Murdock Circle, Suite A
Port Charlotte, FL 33948

The undersigned, being the original member of the professional limited liability company, certifies that this instrument constitutes the proposed Articles of Organization of MARK S. DeGROVE, D.V.M., P.L.

Executed by the undersigned in Charlotte County, Florida on August 28, 2006.


MARK S. DeGROVE, D.V.M.

ACCEPTANCE OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above-stated professional limited liability company at the place designated in this certificate, 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 relating 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 608, Florida Statutes.



DAVID E. OLMSTED, Registered Agent

Dated - August 28, 2006