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SECRETARY OF STAT
TALLAHASSEE, FLOR

T. CLINE

JAN 29 2008

EXAMINER

LO8-10036

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT. Weaver Veterinary Cons	sulting, LLC	
, 5020		ited Liability Company)	
The e	nclosed Articles of Organization and fee(s) are	e submitted for filing.	
Please	e return all correspondence concerning this mat	atter to the following:	
	Janice L. Weaver		
		(Name of Person)	
	Weaver Veterinary Consulti	ting, LLC	
		(Firm/Company)	
	1051 Lake Bell Drive		
		(Address)	
`	Winter Park, FL 32789		
	(Cid	City/State and Zip Code)	
For fu	rther information concerning this matter, please		
Jan	ice L. Weaver	at (Area Code & Daytime Telephone Number)	ingratu;
	(Name of Person)	(Area Code & Daytime Telephone Number)	.CERCE
Enclo	sed is a check for the following amount:	SEE, F	
\$125	5.00 Filing Fee & Certificate of Status		* ;
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Weaver Veterinary Consulting, LLC	
(Must end with the words "Limited Liabilit	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1051 Lake Bell Drive	1051 Lake Bell Drive
Winter Park, FL 32789	Winter Park, FL 32789
business entity with an active Florida registration.) The name and the Florida street address of the re Janice L. Weaver Name	egistered agent are:
1051 Lake Bell Drive	
Florida street addr	ress (P.O. Box <u>NOT</u> acceptable)
Winter Park, FL 3278	19.
City, State, as	
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S.
Registered Agent's Signatur	re (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

1417 117 1419	anager	Name and Address:	
	Managing Member		
MGR		Janice L. Weaver	•
		1051 Lake Bell Drive	_
		Winter Park, FL 32789	- -
MGRM	•	Todd Weaver	
		1051 Lake Bell Drive	
		Winter Park, FL 32789	-
•			
			_
			-
	•		
			_
			- -
•	ent if necessary)	se date of filing: 1/25/2008 (OPTIC	- - - - - -
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)