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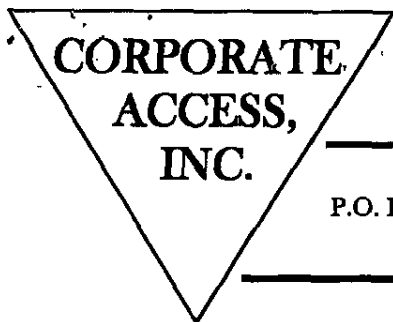
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EXAMINER



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1. Williamsburg Veterinary Clinic, LLC
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

**ARTICLES OF ORGANIZATION
OF
WILLIAMSBURG VETERINARY CLINIC, LLC**

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ARTICLE I. NAME.

The name of this limited liability company is: **WILLIAMSBURG VETERINARY
CLINIC, LLC**

ARTICLE II. PRINCIPAL OFFICE.

The principal place of business and mailing address of this limited liability company is:
5518 Central Florida Parkway, Orlando, FL 32821.

ARTICLE III. INITIAL REGISTERED AGENT AND OFFICE.

The name and address of the initial registered agent is Charles M. Hayes, 5518 Central
Florida Parkway, Orlando, FL 32821.

ARTICLE IV. MEMBERS

The name and street address of the managing member of the limited liability company
executing these articles of organization is: Charles M. Hayes, 5518 Central Florida Parkway,
Orlando, FL 32821.

ARTICLE V. MANAGEMENT.

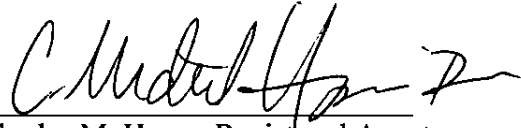
The limited liability company is to be a member-managed company.

The undersigned have executed these Articles of Organization on the 4TH day of
February, 2010.


Charles M. Hayes, Managing Member

Acceptance by Resident Agent

Having been named as registered agent and designated to accept service of process for the above limited liability company, 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.

A handwritten signature in black ink, appearing to read "Charles M. Hayes", written over a horizontal line.

Charles M. Hayes, Registered Agent