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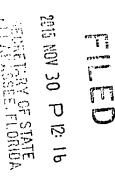
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COVER LETTER

Div	ision of Corp	orations		
SUBJECT:	ENGLISH P	LAZA ANIMAL HOSPITAI	L, LLC	
00000011			ited Liability Company	
The enclosed	Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		Patricia M. Silver, Esq.		
			Name of Person	
		The Silver Law Group, P.A	٩.	
			Firm/Company	
		P.O. Box 710		
			Address	
		Islamorada, FL 33036		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		psilver@silverlawgroup.com		
			to be used for future annual report notification	ation)
For further in	formation cor	ncerning this matter, please ca	all:	
Patricia M. S	-		305 664-3363	
	Name of I	Person	at () Area Code Daytime T	elephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

Pregistration 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 AMENDMENT TO ARTICLES OF ORGANIZATION OF

	O	r ·	
ENGLISH PLAZA ANIMAL HO	SPITAL, LLC		
	•	iny as it now appears on our records.) Liability Company)	## - d - O
		11/20/12	and assigned
The Articles of Organization for this Limited L	iability Company	were filed on 11/30/12	and assigned
Florida document number L12000149825	·		TO T
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
PROSEK ANIMAL HOSPITAL, LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		128 E. Shore Drive	
		Key Largo, FL 33037	
			
Enter new mailing address, if applicable:		128 E. Shore Drive	
(Mailing address MAY BE A POST OFFICE	BOX)	Key Largo, FL 33037	
B. If amending the registered agent and			nter the name of the new
registered agent and/or the new registered o	ince address her	<u>e</u> :	
Name of New Registered Agent:	Patricia M. Silv	er, Esq The Silver Law Group, P.A	
New Registered Office Address:	87889 Overseas	s Highway	
	-	Enter Florida street address	
	Islamorada	, Florid	a 33036
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

MGR = N MBR = A	Manager Authorized Member		
<u> </u>	<u>Name</u>	Address	Type of Action
			□ Add
			Remove
			Change
		-	
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November 24, 2015	(ontional)
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record specifies a delayed effective date but not an effective time, at the 90th day after the record is filed. November 24 Signature of a member or authorized representative of a member of Robert Prosek, DVM	days after filing.) Pursuant to 605.020 tents, this date will not be listed a series of the control of the cont