

L17000197183

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2017 OCT 23 AM 9:32

2017 OCT 23 PM 4:27

K. SALY

OCT 24 2017

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 879936 4306193

AUTHORIZATION :

COST LIMIT : \$25.00 \$25.00

ORDER DATE : October 23, 2017

ORDER TIME : 2:58 PM

ORDER NO. : 879936-005

CUSTOMER NO: 4306193

DOMESTIC AMENDMENT FILING

NAME: NVA TLC VETERINARY  
MANAGEMENT, LLC

EFFECTIVE DATE:

XXX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XXX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NVA TLC VETERINARY MANAGEMENT, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Suzanne M. Hoffman

\_\_\_\_\_  
Name of Person

Katten Muchin Rosenman LLP

\_\_\_\_\_  
Firm/Company

525 West Monroe Street, Suite 1900

\_\_\_\_\_  
Address

Chicago, IL 60661-3693

\_\_\_\_\_  
City/State and Zip Code

sshulman@nvanet.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzanne M. Hoffman

312 577-8306  
\_\_\_\_\_  
at ( )  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |                                                        |                                                                        |                                                                                                  |                                                                                                                            |
|--------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

**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 AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

NVA TLC VETERINARY MANAGEMENT, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2017 OCT 23 AM 9:33  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 09/22/2017 and assigned  
Florida document number L17000197183.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

**Enter new principal offices address, if applicable:**

*(Principal office address MUST BE A STREET ADDRESS)*

**Enter new mailing address, if applicable:**

*(Mailing address MAY BE A POST OFFICE BOX)*

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

*City*

*Florida*

*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**

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Dootel Investments, Inc.	5400 N. Dixie Highway #10	<input type="checkbox"/> Add
		Boca Raton, FL 33487	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gregory Hartmann	29229 Canwood Street, Suite 100	<input checked="" type="checkbox"/> Add
		Agoura Hills, CA 91301	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Scott Shulman	29229 Canwood Street, Suite 100	<input checked="" type="checkbox"/> Add
		Agoura Hills, CA 91301	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Andrew Dooley, DVM	5400 N. Dixie Highway #10	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33487	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2010 OCT 23 11:09:23  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 10/23/10 BY 60322  
UCBAW/STP/STP/STP/STP/STP

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

2011/09/27

REC'D  
OCT 23 AM 9:33  
FBI - NEW YORK


E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated October 24, 2017

  
Signature of a member or authorized representative of a member

Scott Shulman

Typed or printed name of signee