Division of Corporations

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : HOLLAND & KNIGHT (FT. LAUDERDALE).

Account Number : 075410003271 : (954)525-1000 : (954)463-2030 Fax Number

**Enter the email address for this business entity to be used for future 26 annual report mailings. Enter only one email address please | **

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NVA RUSKIN VETERINARY MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

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8/6/2019

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COVER LETTER

TO: Registration S Division of Co				
	kin Veterinary Management, I	uc	į	
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles o	f Amendinent and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:	İ	
	Ashley McCord			
	National Veterinary Associa	Nume of Person		
		Firm/Company	i	
	29229 Canwood Street, Su	site 100		2019 AUG
	Agoura Hills, CA 91301	Address		AUG - T
	Ashley.mccord@nva.com	City/State and Zip Code		PH 4:
		to be used for future annual report notifica	ation)	· N
Ashley McCord	concerning this matter, please c	an: 605 436-0252		on .
	of Person	at () Area Code Daytime T	clephone Number	
Enclosed is a check for	the following amount:			
S25.00 Filing Fee	© \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is analoted)	S60.60 Filing F Certificate of S Certified Copy (additional copy is	Status &
Regis Divis P.O.	LING ADDRESS: stration Section tion of Corporations Bex 6327 hassee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Taliahassee, FL 3230	lons cr Circle	

ARTICLES OF AMENDMENT

(((H19	; 000235084-3))}
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	10	1
ARTICLES	OF ORGANIZATION	
	OF	
NVA Ruskin Veterinary Management, LU	С	
(Name of the Limited Lighilia	is Company as it now uppears on our records.)	-
(A Florida	Limited Liability Company)	
The Articles of Organization for this Limited Liability C	omnany were filed on April 12, 2018	and assigned
1 18000002171	anipally word into our	<u> </u>
Florida document number L18000092171	'	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the abb	reviation "L.L.C."
	• • •	20
Enter new principal offices address, if applicable:		9
(Principal office address MUST BE A STREET ADDR	RESS)	
		J. J.
		7
Post of the state		_ <u> </u>
Enter new mailing address, if applicable:		
(Mailing uddress MAY BE A POST OFFICE BOX)		
		<u> </u>
		1
B. If amending the registered agent and/or regis	stered office address on our records, enter	the name of the new
registered agent and/or the new registered office add	ress here:	
Name of New Registered Agent:		
N 6 12 1000 All II		
New Registered Office Address:	Enter Florida street address	
	1 3	
	, Florida	Zip Code
	•	1
New Registered Agent's Signature, if changing Registere		
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	complete performance of my duties, and I am for sigent as provided for in Chapter 605, F.S. Or, ed office address, I hereby confirm that the lim	imiliar with and if this document is
	If Changing Registered Agent, Signature of New Re-	intered Agent
	Page 1 of 3	
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	11.116	じょいしいようししつべ リノバ

	from our records:		
MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	Name National Votorinary Associates, Inc.	Address	Type of Action
MGR			
		29229 Canwood Street, Agoura Hills, CA 91301	≅ Remove
			☐ Change
AMBR	National Veterinary Associates, Inc.	29229 Canwood Street, Sulte 100 Agoura Hills, CA 91301	BAdd
			☐ Remove
			Change
			Add S
			Change
			☐ Remove
			□ Change
			DAdd
			□ Remove
			Cliange
			Remove
			C Change

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. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	į
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Note: If	to date, if other than the date of filing:	ursuant to 605.0207 (3)(b) Il not be listed as the
the reco) The S	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. or 90th day after the record is filed.	the earlier of:
Dated	August 5th, 2019.	
178150	,	
	61	
	Signature of a member or authorized representative of a member	
	Scott Shulman, Secretary and Treasurer	1
	Typed or printed name of signed	
	Page 3 of 3	
	Filing Fee: \$25.00	
	(((H19000235084 3)