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(Requestor's Name)					
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(Cit	ry/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
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Certified Copies	_ Certificates	s of Status			
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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 290445/ 4304937

AUTHORIZATION : Speed to the control of the control

COST LIMIT : \$ 125.00

ORDER DATE: September 14, 2016

ORDER TIME : 10:13 AM

ORDER NO. : 290445-005

CUSTOMER NO: 4304937

FOREIGN FILINGS

NAME: OVH OPERATING LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

	egistration Section vision of Corporations					
CHD IE	OVH Operating LLC					
SUBJEC	Name of Limited Liability	Сотрапу				
The enclo	d "Application by Foreign Limited Liability Company for Authorizated check are submitted to register the above referenced foreign limited	ation to Transact Business in Florida," Certificate of ited liability company to transact business in Florida				
Please rea	n all correspondence concerning this matter to the following:					
	Guy Abramovitz					
	Name of Person					
	Veterinary Practice Partners, LLC					
	Firm/Company					
	601 Henderson Road, Suite 155					
	Address					
	King of Prussia, PA 19406					
	City/State and Zip Code					
	gabramovitz@vetpartners.com					
	E-mail address: (to be used for future annual	report notification)				
For furthe	nformation concerning this matter, please call:					
1	ra Brookfield 617	348-1858				
-	Name of Contact Person Area Code	Daytime Telephone Number				
R P	ILING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
	check for the following amount: 125.00 Filing Fee \$\mathbb{\Pi}\$\$ \$130.00 Filing Fee \$\mathbb{\Pi}\$\$ Certificate of Status \$\mathbb{\Pi}\$\$ Certified Copy	g Fee & \$\Bigcup \$160.00 Filing Fec, Certificate of Status & Certified Copy				

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

, OVH Operating LLC	·			
(Name of Fore	ign Limited Liability Company; must in	oclude "Limited Liab	ility Company," "L.L.C.,	or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C.	ternate name adopted for the purpose of "or "LLC.")	transacting business	in Florida. The alternate	name must include "Limited
2. Delaware		3.	•	
	of which foreign limited liability	J	(FEI number, if applica	ble)
4. No business prior to re				
	(Date first transacted business in (See sections 605.0904 & 605.090	n Florida, if prior to 15, F.S. to determine	registration.) penalty liability)	
5. 7785 Oakhurst Road				
Seminole, FL 33776				
6. 601 Henderson Road, S	(Street Address of Princuite 155	cipal Office)		
King of Prussia, PA 19				
	(Mailing Add	ress)		
7. Name and street addres	s of Florida registered agent: (P.O. I	Box <u>NOT</u> accepta	ble)	There was
Name:	Corporation Service Company			SA
Office Address:	1201 Hays Street			7 1
	Tallahassee		, Florida 32301	
	(City)		(Zip code)	
Registered agent's accept	ance: gistered agent and to accept service	of process for the	ahove stated limited li	ability company at the place
lesignated in this applicat	ion, I hereby accept the appointmen	nt as registered ag	ent and agree to act in	this capacity. I further agree
	ns of all statutes relative to the prop	per and complete,	performance of my du	ties, and I am familiar with ar
eccept the obligations of n	ny position as registered agent. Corporation Service Company	14-1		Melissa Zender
	By: //	1. Luch	₹>	Asst. Vice President
	(Registered	agent's signature)	-	TOO I TOSIGEIIL
8. The name, title or capa	city and address of the person(s) who	o has/have authori	ty to manage is/are:	
Veterinary Practice Partne	rs, LLC, Manager			
601 Henderson Road, Suit		·		
King of Prussia, PA 19406				·
. Attached is a certificate urisdiction under the law of the translator must be su	Mille	icate is in a foreig	ited by the official havi n language, a translation	ng custody of records in the n of the certificate under oath
	\\\ Signature of a	n authorized person		
his document is executed ubmitted in a document to	in accordance with section 605.0203 the Department of State constitutes a	3 (1) (b), Florida S a third degree felor	latutes. I am aware that ny as provided for in s.8	any false information 817.155, F.S.
	Guy Abramovitz			
	<u> </u>	ed name of signee		

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "OVH OPERATING LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OVH OPERATING LLC" WAS FORMED ON THE TWELFTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 202988233

Date: 09-14-16