

M 17000006083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

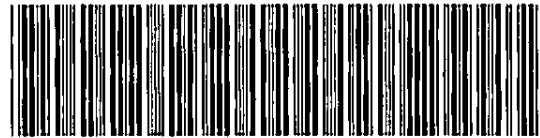
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500301363325

07/17/17--01025-022 250.00  
17 JUL 17 AM 11:49  
FILED  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

JUL 19 2017

SULKER



July 14, 2017

**VIA UPS OVERNIGHT DELIVERY**

Florida Department of State  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee FL 32301

RE: Country Critters Veterinary Clinic, LLC  
Florida Document Number M17000005713

Dear Sir or Madame:

Enclosed please find the Applications by Foreign Limited Liability Company for Authorization to Transact Business in Florida for the following Series of the above-referenced limited liability company:

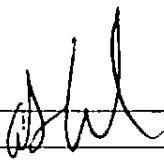
1. Country Critters Veterinary Clinic, LLC, Series 1, Ocala, Florida
2. Country Critters Veterinary Clinic, LLC, Series 2, Gainesville, Florida

Per Illinois law, any Series of a limited liability company must contain the full name of said limited liability company. Therefore, for the purposes of registering as a foreign limited liability company in the State of Florida, Country Critters Veterinary Clinic, LLC grants permission of the use of the Country Critters Veterinary Clinic name to Series 1, Ocala, Florida and Series 2, Gainesville, Florida.

Do not hesitate to contact me should you have any questions.

Sincerely,

COUNTRY CRITTERS VETERINARY CLINIC, LLC  
By: RK Holdings, LLP, its sole and managing member

By:   
Title: ALEX MELVIN  
PRESIDENT

Enclosures



**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:*

1. Country Critters Veterinary Clinic, LLC, Series 1, Ocala, Florida  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Illinois 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FPI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4216 Dewitt Avenue 6. 4216 Dewitt Avenue  
(Street Address of Principal Office) (Mailing Address)  
Mattoon IL 61938 Mattoon IL 61938

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company  
 Office Address: 1201 Hays Street  
Tallahassee Florida 32301  
(City) (Zip code)

**Registered agent's acceptance:**  
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, 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.*

*Susan Carter Best*  
(Registered agent's signature)

RECEIVED  
 DEPARTMENT OF STATE  
 FLORIDA  
 17 JUL 17 AM 11:49  
 FED

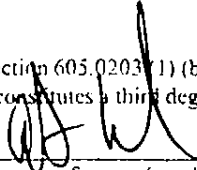
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Managing Member</u>	<u>RK Holdings, LLP</u> <u>4216 Dewitt Avenue</u> <u>Mattoon IL 61938</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
 \_\_\_\_\_  
Signature of an authorized person  
ALEX MELVIN, PRESIDENT  
Typed or printed name of signer

File Number

0595355-3



**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that*

COUNTRY CRITTERS VETERINARY CLINIC, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON SEPTEMBER 14, 2016, AND HAVING ESTABLISHED A SERIES WITH THE DESIGNATED NAME OF COUNTRY CRITTERS VETERINARY CLINIC, LLC, SERIES 1, OCALA, FLORIDA ON JULY 12, 2017, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



***In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 12TH day of JULY A.D. 2017 .***

*Jesse White*

SECRETARY OF STATE