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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

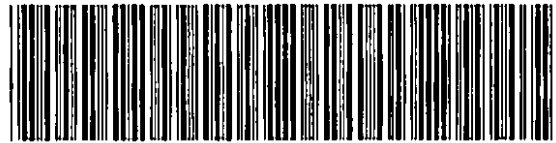
(Business Entity Name)

(Document Number)

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

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S. ROBERTS

MAR 28 2022

F

James H. Moore, III  
Luanne Clarke \*  
Willis A. DuVall, Jr.  
W. Ralph Rodgers, Jr.  
David A. Garland \*\*  
C. Jason Wilcox  
Kevin C. Gaulke \*\*  
D. Bradley Folsom  
Wallace D. Bonner, Jr.  
Matthew E. Futzler \*\*  
R. Lee Brown, Jr.  
M. Drew DeMott \*\*  
Michael Eric Hooper  
James H. Edge  
Stephan A. Ray \*\*  
Wheeler H. Bryant \*\*  
Elizabeth W. Bruce  
Jessica Cramm  
Christopher C. Hazelip, Jr.  
Jamie L. Bratcher  
Lindsay Hudgins

- \* Additional Licenses
- \* Certified Mediator/Arbitrator
- \*\* Certified Mediator

MOORE CLARKE  
DUVALL & RODGERS  
ATTORNEYS AT LAW

2829 Old Dawson Road (31707)  
Post Office Drawer 71727  
Albany, Georgia 31708-1727  
Telephone (229) 888-3338  
Facsimile (229) 888-1191  
Real Estate Fax (229) 888-2199  
E-mail: [ehooper@mcd-r-law.com](mailto:ehooper@mcd-r-law.com)

Reply To:  
Albany Office

March 25, 2022  
**VIA FED EX: 776403735442**

Atlanta Office  
900 Circle 75 Parkway, Suite 1175  
Atlanta, Georgia 30339  
(770) 563-9339

Savannah Office  
SunTrust Building  
33 Bull Street, Suite 203 (31401)  
Post Office Box 8427  
Savannah, Georgia 31412  
(912) 234-0995

Valdosta Office  
2611 North Patterson Street (31602)  
Post Office Box 4540  
Valdosta, Georgia 31604-4540  
(229) 245-7823

Tifton Office  
F. Mark Sandifer, Partner  
3300 Fulwood Road (31794)  
Post Office Box 7170  
Tifton, Georgia 31793  
(229) 382-0037

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Re: Fort Myers Veterinary Properties, LLC  
MCDR File No.: 2481.105

Dear Sir or Madam:

On behalf of Fort Myers Veterinary Properties, LLC please find enclosed the following documents:

- (1) One original Certificate of Existence for Fort Myers Veterinary Properties, LLC;
- (2) Cover Letter and Application by Foreign Corporation for Authorization to Transact Business in Florida; and
- (3) A check in the amount of one hundred twenty – five Dollars (\$125.00), made payable to the Florida Department of State for filing fees.

Should you have any questions regarding this filing or the enclosed documents, or if you require additional information, please contact me at (229) 888-3338.

Thank you for your attention to this matter.

With kindest regards, I am

Very truly yours,

Moore, Clarke, DuVall & Rodgers, P.C.

A handwritten signature in black ink, appearing to read "Stephan Ray". The signature is stylized with a large, looped "P" at the end.

Stephan Ray

SR/js  
Enclosure



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

Attached are the instructions to register a foreign limited liability company to transact business in Florida. The requirements are as follows:

Pursuant to s. 605.0902, Florida Statutes, the attached application must be completed in its entirety.

The foreign limited liability company **must** submit 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.

- The name of a limited liability company must be distinguishable on the records of the Florida Department of State. If the name of your limited liability company is not distinguishable on our records, you must adopt an alternative name to use in the state of Florida.
- The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company." The abbreviation "L.L.C." or the designation "LLC."

A preliminary search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org). Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

The fees to register are as follows:

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

➤ **Important Information About the Requirement to File an Annual Report**

All Foreign Limited Liability Companies must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1<sup>st</sup> and May 1<sup>st</sup>. The fee for the annual report is \$138.75. After May 1<sup>st</sup> a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1<sup>st</sup>, go to our website at [www.sunbiz.org](http://www.sunbiz.org). There is no provision to waive the late fee. Be sure to file before May 1<sup>st</sup>.

A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fee and any optional certificate or copy.

A COVER letter should be submitted along with the application, certificate, and check. The mailing address and courier address are noted below.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Fort Myers Veterinary Properties, LLC

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

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Steven D. Whatley

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

Fort Myers Veterinary Properties, LLC

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

516 Eight Mile Road

\_\_\_\_\_  
Address

Albany, Georgia 31721

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

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

For further information concerning this matter, please call:

Steven D. Whatley

229

439-7073

at (\_\_\_\_\_) \_\_\_\_\_

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

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, 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:*

1. Fort Myers Veterinary Properties, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")

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

2. Georgia

(Jurisdiction under the law of which foreign limited liability company is organized)

3. N/A

(FEI number, if applicable)

4. N/A

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

5. 516 Eight Mile Road

(Street Address of Principal Office)

Albany, Georgia 31721

6. 516 Eight Mile Road

(Mailing Address)

Albany, Georgia 31721

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

Name: Matthew R. Schroeder, Esq.

Office Address: 1700 S. MacDill Ave., STE 200

Tampa

(City)

Florida

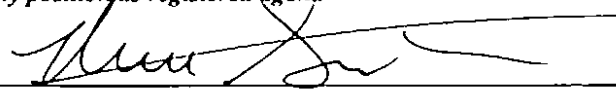
33629

(Zip code)

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**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.*



(Registered agent's signature)


8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Steven D. Whatley</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>516 Eight Mile Road</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Albany, Georgia 31721</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Steven D. Whatley</u>	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: <u>516 Eight Mile Road</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Albany, Georgia 31721</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

Steven D. Whatley  
\_\_\_\_\_  
Typed or printed name of signee

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### **Fort Myers Veterinary Properties, LLC**

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 22833778  
Date Inc/Auth/Filed: 03/04/2022  
Jurisdiction : Georgia  
Print Date : 03/22/2022  
Form Number : 211



*Brad Raffensperger*

Brad Raffensperger  
Secretary of State