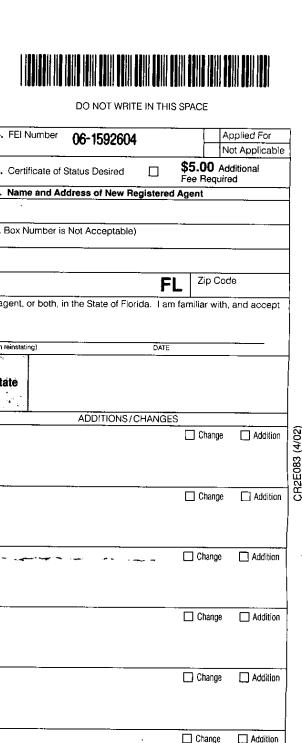
FILED 2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # M9900000900 VETCOR OF BARDMOOR LLC 08-18-2002 90125 028 ****50 00 Principal Place of Business Mailing Address AA405 STARKEY RD. C/O THE VETCOR GROUP LARGO FL 33773 350 LINCOLN PLACE HINGHAM MA 02043 2. Principal Place of Business 3. Mailing Address Arian + Animal Hospital of Bordmoor Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 1405 Starkey ity & State City & State 4. FEI Number Applied For 06-1592604 ^{Zi}3 3773 Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** City Zip Code 3. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By September 25, 2002 MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES **MGRM** TITLE ☐ Delete TITLE ☐ Change NAME VETCOR PROFESSIONAL PRACTICES LLC NAME STREET ADDRESS 350 LINCOLN PLACE STREET ADDRESS CITY-ST-7IP HINGHAM MA 02043 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

Aug 18, 2002 8:00 am Secretary of State



11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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