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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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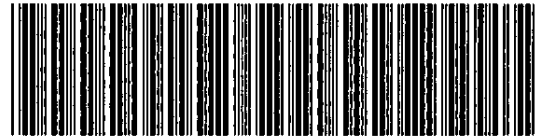
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** University of Florida Student Chapter of the Association of Shelter Veterinarians, Inc.  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: Jeannette Peters  
Name (Printed or typed)

5015 NW 24th Drive  
Address

Gainesville, FL 32605  
City, State & Zip

352-371-7412  
Daytime Telephone number

jp@getfunded.org  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**  
**of**  
**UNIVERSITY OF FLORIDA STUDENT CHAPTER OF ASSOCIATION OF SHELTER VETERINARIANS, INC.**

In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I: Name**

The name of the corporation shall be:  
University of Florida Student Chapter of Association of Shelter Veterinarians, Inc.

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**ARTICLE II: Principal Office**

The street address of the Principal Office is 2015 SW 16<sup>th</sup> Avenue, UF CVM-Shelter Medicine, Gainesville, Florida 32608. The mailing address shall be the same as the Principal Office address.

**ARTICLE III: Purpose**

- (a) Notwithstanding any other provisions of these articles, the purposes for which this organization is organized are exclusively religious, charitable, scientific, literary and educational within the meaning of section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue law.
- (b) Notwithstanding any other provisions of these articles, this organization shall not carry on any activities not permitted to be carried on by an organization exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue law.
- (c) Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code of 1986, or corresponding section of any future Federal tax code, or shall be distributed to the Federal, state or local government for a public purpose. Any such assets not so disposed of shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the organization is then located, exclusively for such purposes.
- (d) The specific purposes for which this corporation is organized are: To advocate for the health, safety and humane treatment of pet animals housed in community animal shelters; to identify and promulgate best practices in veterinary care and animal shelter protocols; to support the development of the practice of shelter veterinary medicine; to provide necessary veterinary care on a volunteer basis to sheltered animals, including sterilization and vaccinations; to promote and support the adoption of rescued pet animals into good homes; to promote spaying and neutering of all pet animals; and to educate the public about responsible pet ownership.

**ARTICLE IV: Manner of Election**

The manner in which the directors are elected and appointed is through direct election by the general membership of the organization.

**ARTICLE V: Initial Officers and Directors**

Patricia Dingman, President  
4700 SW Archer Rd. L-82  
Gainesville, FL 32608

Jaime Willson, Vice President  
5601 NW 26<sup>th</sup> Terrace  
Gainesville, FL 32653

Jill Kirk, Secretary  
2370 SW Archer Rd. #83  
Gainesville, FL 32608

Amanda Stiles, Treasurer  
2330 SW Williston Rd. #2726  
Gainesville, FL 32608

Dr. Natalie Isaza  
2016 SW 16<sup>th</sup> Ave.  
UF-CVM Shelter Medicine  
Gainesville, FL 32608

Dr. Brian DiGangi  
2016 SW 16<sup>th</sup> Ave.  
UF-CVM Shelter Medicine  
Gainesville, FL 32608

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TALLAHASSEE, FLORIDA

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**ARTICLE VI: Registered Agent**

The name and Florida street address of the registered agent is:

Jeannette Peters  
5015 NW 24<sup>th</sup> Drive  
Gainesville, FL 32605

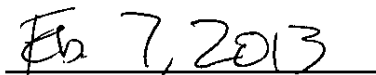
**ARTICLE VII: Incorporator**

The name and address of the incorporator is:

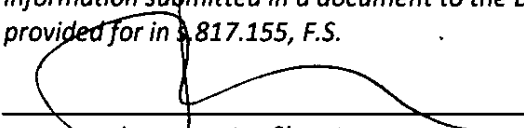
Jeannette Peters  
5015 NW 24<sup>th</sup> Drive  
Gainesville, FL 32605

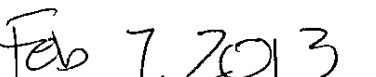
*Having been named as registered agent to accept service of process for the above-stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

  
\_\_\_\_\_  
Registered Agent Signature

  
\_\_\_\_\_  
Date

*I submit this document and affirm that the facts stated herein are true. 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 § 817.155, F.S.*

  
\_\_\_\_\_  
Incorporator Signature

  
\_\_\_\_\_  
Date