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☐ PICK-UP

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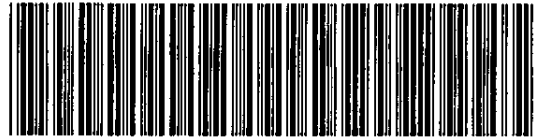
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



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02/17/15--01027--014 **78.75

APPROVED
AND
FILED

15 MAY 26 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FL 32301

WLS-12067

Office Use Only

COVER LETTER

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

SUBJECT: Students for International Veterinary Opportunities, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Camila de Andino
Name (Printed or typed)
3000 SW 35th place Apt F203
Address
Gainesville, FL 32608
City, State & Zip
787-633-3716
Daytime Telephone number
deandino.camila@ufl.edu
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 18, 2015

CAMILLA DE ANDINO
3000 SW 35TH PLACE APT F203
GAINESVILLE, FL 32608

SUBJECT: STUDENTS FOR INTERNATAIONAL VETERINARY
OPPORTUNITIES, INC.
Ref. Number: W15000012067

We have received your document for STUDENTS FOR INTERNATAIONAL VETERINARY OPPORTUNITIES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Should this be a NON-PROFIT?

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 515A00003472

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

ARTICLE I NAME

The name of the corporation shall be: Students for International Veterinary Opportunities, Inc.

APPROVAL
AND
FILED

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2015 SW 16th Ave.

Mailing address, if different is: 15 MAY 26 PM 2:54

Gainesville, FL 32610

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Att: Dr. Amy Stone

ARTICLE III PURPOSE

Students for International Veterinary Opportunities (SIVO) was established
The purpose for which the corporation is organized is: _____
for the purpose of providing an academic program and non-profit effort of veterinary students and doctors at the University of Florida
whose goal is to deliver basic veterinary care to locations outside of the United States.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Secret ballot

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Camila de Andino, President

Address: 3000 SW 35th place Apt F203
Gainesville, FL 32608

Name and Title: Megan Sullivan, Vice President

Address: 2370 SW Archer Road, Apt 57
Gainesville, FL 32608

Name and Title: Ariel Smith, Treasurer

Address: 2370 SW Archer Road, Apt 49
Gainesville, FL 32608

Name and Title: Emily Menzen, Secretary

Address: 2370 SW Archer Road, Apt 68
Gainesville, FL 32608

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

APPROVED
AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Dr. Amy Stone
 Address: 2015 SW 16th Ave
Gainesville, FL 32610

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Camila de Andino
 Address: 3000 SW 35th place Apt F203
Gainesville, FL 32608

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Amy E. Stone

Required Signature of Registered Agent

5/16/2015

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 s.817.155, F.S.

[Signature]

Required Signature of Incorporator

5/16/2015

Date