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| · (Re | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL . |
| (Bu | siness Entity Name | e) |
| (Document Number) | | |
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NC Amend

SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

| | | _ | |
|---------------------------------------|------------------------------|------------------------------------|-----------|
| NAME OF CORPORATION: | Hovida Ve | terinary Spec | ialists |
| • | chartable | bundali on | ,Inc |
| DOCUMENT NUMBER: | N9900000 | 3615 | |
| The enclosed Articles of Amendme | ent and fee are submitte | ed for filing. | |
| Please return all correspondence co | oncerning this matter to | the following: | |
| - | _ | _ | |
| Daran | Shaw | | |
| <u> </u> | (Name of Contact Person | n) | |
| Florida | Veterian | Specialists | |
| 3000 B | uscia laike | n)Specialists Blod | |
| | (Firm/ Company) | | |
| | (Time Company) | | |
| | | | |
| lampa_ | R 33614 | i | |
| • | (Address) | • | |
| | | | |
| | | | |
| | (City/ State and Zip Cod | le) | |
| For further information concerning | this matter places call | • | |
| 1 of further information concerning | this matter, please can | • | |
| . | , | a aa aa a | n 1. 16- |
| Dary Shaw (Name of Contact Perso | at (_ | 943) 933 - 80 | 144 |
| YName of Contact Perso | n) | (Area Code & Daytime Telephon | e Number) |
| Enclosed is a check for the following | ng amount: | | |
| \$35 Filing Fee \$43.75 F | iling Fee & S43.75 Fi | ling Fee & S52.50 Filing Fe | æ |
| Certifica | ite of Status Certified | Copy Certificate of St | atus |
| | | nal copy is Certified Copy | |
| | enclosed | f) (Additional Cop is enclosed) | у |
| Mailing Address | | Street Address | |
| Amendment Section | | Amendment Section | |
| Division of Corporation | ons | Division of Corporations | |
| P.O. Box 6327 | | Clifton Building | |
| Tallahassee, FL 32314 | 4 | 2661 Executive Center Circle | e |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| Florida Veterinary Specialists Charitable (Name of corporation as currently filed with the Florida Dept. of State) |
|---|
| (Name of corporation as currently filed with the Florida Dept. of State) |
| N99000003615 |
| (Document number of corporation (if known) |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: |
| NEW CORPORATE NAME (if changing): |
| (must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may <u>not</u> be used in the name of a not for profit corporation) |
| AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) |
| Article III |
| Board of Directors |
| Section 2. Number, Tenure and Oudification |
| The number of directors of the Europaration |
| Shau be no less than three (3) and |
| no more than twenty (20). |
| |
| Now Board: See attached |
| |
| |
| |
| |
| |

(Attach additional pages if necessary) (continued)

Cari Sadler - President 3000 Busch Lake Blvd Tampa FL 33614 813-933-8944

Kristen Levine - Secretary Fetching Communications 3510 Forelock Drive Tarpon Springs, FL 34688 727-480-8030

Paul Levine 3510 Forelock Drive Tarpon Springs, FL 34688 727-480-8030

Terry Buckley 1402 E Hanna Ave Tampa, FL 33604 813-629-0585

Dr. Valerie Sadler 3000 Busch Lake Blvd Tampa FL 33614 813-933-8944

Dr. Neil Shaw 3000 Busch Lake Blvd Tampa FL 33614 813-933-8944

Darryl Shaw 3000 Busch Lake Blvd Tampa FL 33614 813-933-8944

Jamilou Rosenkrans 8402 Tallahassee Drive NE St Petersburg, FL 33702 727-527-9672

Lisa DeBartolo DeBartolo Property Group 15438 North Florida Ave Tampa, FL 33613 813-964-8302

Heather McCauley, Executive Director (ex officio) 725 East Lake Road North Tarpon Springs, FL 34688 727-942-3616

| The date of adoption of the amendment(s) was: Nov 7, 2007 |
|---|
| Effective date if applicable: Nov 7, 2007 (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) (CHECK ONE) |
| The amendment(s) was (were) adopted by the members and the number of votes case for the amendment was sufficient for approval. |
| There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors. |
| Signature (By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) |
| (Typed or printed name of person signing) |
| President of the Board (Title of person signing) |

FILING FEE: \$35