P01000073428

TRANSMITTAL LETTER

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

SUBJECT: BobCat Veterinary Services, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

300004491713--3
-07/23/01--01088--009 T
*****87.50 *****87.50

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 of Status

ADDITIONAL COPY REQUIRED

FROM: David H. Doyens
Name (Printed or typed)

23363 Superior Ave
Address

Port Charlotte FL 33954
City, State & Zip

(941) 623-0232
Daytime Telephone number

FILED
01 JUL 23 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

7-26-01

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
01 JUL 23 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

BobCat Veterinary Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

23363 SUPERIOR AVE
PORT CHARLOTTE, FL 33954-3642

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

providing veterinary medical services personel

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

David H. Doyens, DVM
23363 Superior Ave
Port Charlotte, FL 33954-3642

ARTICLE VI REGISTERED AGENT

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

Steve Vollmer
c/o Professional Taxes, Inc.
425 Cross St #113
Punta Gorda, FL 33950

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

David H. Doyens, DVM
23363 Superior Ave
Port Charlotte, FL 33954-3642

David H. Doyens
23363 Superior Ave.
Port Charlotte, FL 33954

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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

Signature/Registered Agent — Date: 7/10/01

Signature/Incorporator, DVM — Date: 7-13-01