

P02000093141

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

500007349345--9
-08/26/02--01092--001
*****78.75 *****78.75

SUBJECT: LISA A. COOPER, DVM, PA

Enclosed please find an original and one (1) copy of the articles of incorporation and a check in the amount of \$78.75.

FROM: Amy H. Taylor, CPA, PA
5185 Castello Drive, Suite 2
Naples, FL 34103
(239) 261-1040

FILED
02 AUG 26 AM 8:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

A large, stylized handwritten signature in black ink, likely belonging to Amy H. Taylor, CPA, PA.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I - NAME

The name of the corporation shall be:

LISA A. COOPER, DVM, PA

ARTICLE II - PURPOSE OF CORPORATION

The purpose for which this corporation is organized is:

The Practice of Veterinary Medicine

ARTICLE III - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7700 Trail Blvd, Suite 10
Naples, FL 34108

ARTICLE IV - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 shares

ARTICLE V - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Amy H. Taylor, CPA
5185 Castello Drive, Suite 2
Naples, FL 34103

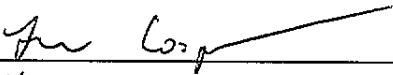
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TALLAHASSEE FLORIDA

ARTICLE VI - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

**Lisa A. Cooper
7700 Trail Blvd, Suite 10
Naples, FL 34108**

The undersigned incorporator has executed these Articles of Incorporation this
15th day of August, 20 02.


Signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT / REGISTERED OFFICE**

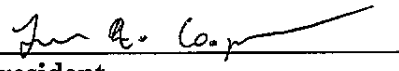
PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: LISA A. COOPER, DVM, PA

2. The name and address of the registered agent and office is:

AMY H. TAYLOR, CPA
5185 Castello Drive, Suite 2
Naples, FL 34103

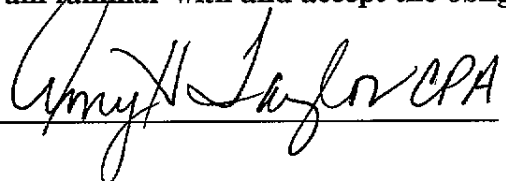
3. Authorized by:



President
August 15, 2002

FILED
02 AUG 26 AM 8:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

 8/15/02