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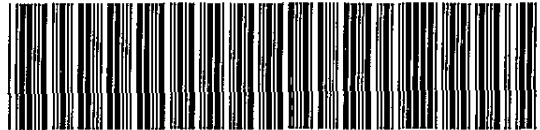
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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MJC

MICHAEL J. COOPER  
ATTORNEY AT LAW

321 N.W. 3RD AVENUE • OCALA, FLORIDA 34475 • TELEPHONE 352-732-4500 • FAX 352-351-3859

AUGUST 13, 2003

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

RE: *Janine A. Weller, D.V.M., Limited Liability Corporation*

Dear Sirs:

Please find enclosed the original and one copy of the proposed Charter for the above referenced limited liability corporation (including designation of Resident Agent) together with a check payable to your order in the amount of \$125.00 to cover the following:

Filing fee for Charter	\$ 100.00
Filing fee for Certificate of Registered Agent	25.00
<b>TOTAL:</b>	<b>\$ 125.00</b>

Please return the certified copy of the Charter to me.

Thank you for your cooperation in this matter.

Sincerely yours,

Michael J. Cooper

MJC/slw

Enclosures

xc: Janine A. Weller, D.V.M.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION  
OF  
JANINE A. WELLER, D.V.M., INC.**

The undersigned, for the purposes of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I - NAME**

The name of the corporation is Janine A. Weller, D.V.M., Inc. with a principal office and mailing address of 17885 NE 2<sup>nd</sup> Place, Williston, FL 32696.

**ARTICLE II - COMMENCEMENT AND DURATION**

The duration of the corporation is perpetual. The date and time of the commencement of corporate existence is the time of filing of the Articles of Incorporation by the Department of State of the State of Florida.

**ARTICLE III - PURPOSE**

The general purposes for which the corporation is organized are to transact any lawful business for which corporations may be incorporated under the Florida General Corporation Act.

**ARTICLE IV - CAPITAL STOCK**

The aggregate number of shares which the corporation is authorized to issue is Seven Thousand Five Hundred (7,500) shares. Such shares shall be of a single class and shall have a par value of One Dollar (\$1.00) per share.

**ARTICLE V - REGISTERED OFFICE**

The street address of the initial principal office and registered office of the corporation is: 17885 NE 2<sup>nd</sup> Place, Williston, FL 32696 The name of its initial Registered Agent is JANINE A. WELLER, D.V.M.,

**ARTICLE VI - INITIAL BOARD OF DIRECTORS**

The corporation shall have one (1) director(s) initially. The number of directors may be either increased or diminished from time to time by the By-Laws. The name and address of the initial director(s) is/are:

JANINE A. WELLER, D.V.M., 17885 NE 2<sup>nd</sup> Place, Williston, FL 32696

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ARTICLE VII - INCORPORATOR

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The name and address of the incorporator is:

JANINE A. WELLER, D.V.M., 17885 NE 2<sup>nd</sup> Place, Williston, FL 32696

ARTICLE VIII

This corporation is a small business corporation within the meaning of Section 1244 of the Internal Revenue Code and as soon as is practicable this corporation shall adopt a Section 1244 offering plan.

ARTICLE IX - PRE-EMPTIVE RIGHTS

The shareholder(s) may adopt, by written agreement, a plan providing for pre-emptive rights as to the issuance, sale or transfer of any stock. If such agreement exists there shall be printed on the face of all stock in a legible manner proper words to notify any holder, buyer or transferee thereof of such agreement.

EXECUTED by the undersigned person at Ocala, Marion County, Florida, on this the 13th day of August, 2003.

Janine A. Weller, DVM  
JANINE A. WELLER, D.V.M., Incorporator

I, JANINE A. WELLER, D.V.M., accept the office of Registered Agent. I am located at 17885 NE 2<sup>nd</sup> Place, Williston, FL 32696, the registered office of this corporation.

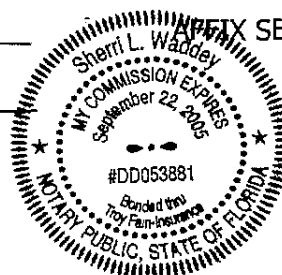
Janine A. Weller, DVM  
JANINE A. WELLER, D.V.M., Registered Agent

STATE OF FLORIDA  
COUNTY OF MARION

The foregoing instrument was acknowledged before me this 13th day of August, 2003 by JANINE A. WELLER, D.V.M., as Incorporator and JANINE A. WELLER, D.V.M., as Registered Agent, who:

- A) ☒ is/are personally known to me OR  
☒ who has/have produced a driver's license OR  
other identification:  
B) ☒ did OR ☐ did not take an oath.

Sherri L. Waddey  
Signature of Notary Public  
Print Name: SHERRI L. WADDEY



NOTARY SEAL/EXPIRATION DATE: