# PA4888046935

| (Requestor's Name)                      |           |  |  |  |
|---|-----------|--|--|--|
|   |           |  |  |  |
| (Address)                               |           |  |  |  |
|   |           |  |  |  |
| (Address)                               |           |  |  |  |
|   |           |  |  |  |
| (City/State/Zip/Phone #)                |           |  |  |  |
| PICK-UP WAIT MAIL                       |           |  |  |  |
|   |           |  |  |  |
| (Business Entity Name)                  |           |  |  |  |
|   |           |  |  |  |
| (Document Number)                       |           |  |  |  |
|   |           |  |  |  |
| Certified Copies Certificates of Status |           |  |  |  |
|   |           |  |  |  |
| Special Instructions to Filing Officer: |           |  |  |  |
|   |           |  |  |  |
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# TRANSMITTAL LETTER

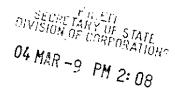
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

| SUBJECT: Ace             | Veterinary Support, Inc            |                           |                  |  |  |
|--------------------------|------------------------------------|---------------------------|------------------|--|--|
|                          | (PROPOSED CORPORA                  | TE NAME – <u>MUSTINCL</u> | UDE SUFFEX)      |  |  |
|                          |                                    |                           |                  |  |  |
|                          |                                    |                           |                  |  |  |
| Enclosed are an orig     | rinal and one (1) copy of the arti | cles of incorporation and | a check for:     |  |  |
| \$70.00                  | <b>☑</b> \$78.75                   | <b>□</b> \$78.75          | <b>□</b> \$87.50 |  |  |
| Filing Fee               | Filing Fee                         | Filing Fee                | Filing Fee,      |  |  |
| I ming I cc              | & Certificate of Status            | & Certified Copy          | Certified Copy   |  |  |
|                          | or certificate of ballas           | oc continua copy          | & Certificate of |  |  |
|                          |                                    |                           | Status           |  |  |
|                          |                                    | ADDITIONAL CO             |                  |  |  |
|                          |                                    | 110111101                 |                  |  |  |
| FROM: A                  | licia C Esser                      | ÷                         |                  |  |  |
| Name (Printed or typed)  |                                    |                           |                  |  |  |
|                          |                                    |                           |                  |  |  |
| 4156 Stratford Way       |                                    |                           |                  |  |  |
| Address                  |                                    |                           |                  |  |  |
|                          |                                    |                           |                  |  |  |
|                          | Jacksonville, FL 32225             |                           |                  |  |  |
| City, State & Zip        |                                    |                           |                  |  |  |
|                          | 904-703-0789                       |                           |                  |  |  |
| Daytime Telephone number |                                    |                           |                  |  |  |

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

## **ARTICLES OF INCORPORATION**

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



### ARTICLE I NAME

The name of the corporation shall be:

Ace Veterinary Support, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4156 Stratford Way Jacksonville, FL 32225

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide veterinary and consulting services

### ARTICLE IV SHARES

The number of shares of stock is:

100

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Alicia C. Esser - president 4156 Stratford Way Jacksonville, FL 32225

### ARTICLE VI REGISTERED AGENT

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

Alicia C. Esser 4156 Stratford Way Jacksonville, FL 32225

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Alicia C. Esser 4156 Stratford Way Jacksonville, FL 32225

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

| ACG.            | 3/6/04 |
|-----------------|--------|
| Alicia C Esser  | Date   |
| ACE             | 3/6/04 |
| Alicia C. Esser | Date   |