

P04000050595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

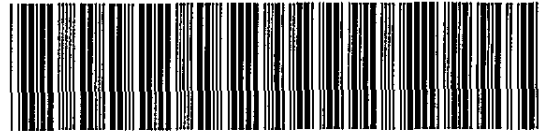
(Business Entity Name)

(Document Number)

Certified Copies	Certificates of Status
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SECRET
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: TLC Animal Hospital II, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Mieke Baks
Name (Printed or typed)

11099 Biscayne Blvd
Address

Miami, FL 33161
City, State & Zip

305-892-2333
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:

TLC Animal Hospital II, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11099 Biscayne Blvd
Miami, FL. 33161

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct any business permitted by the
Specifically To provide veterinary services State of Florida and

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):

Mieke Baks President
1000 NE 116 Street
Biscayne Park, FL. 33161

ARTICLE VI REGISTERED AGENT

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

Mieke Baks
1000 NE 116 Street
Biscayne Park, FL. 33161

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mieke Baks
1000 NE 116 Street
Biscayne Park, FL. 33161

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

3/16/04

Signature/Incorporator

Date

3/16/04

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA