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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	rporation: <u>Sunsh</u>	ine Veterinary	Services, P.A.	
DOCUMENT N	NUMBER: <u>P0.5000</u>	0037448		
The enclosed Ar	ticles of Amendment and fee are	submitted for filing.		
Please return all	correspondence concerning this	matter to the following:		
	Carrie R (Name of	Contact Person)	······································	
_	(Firm	/ Company)	·	
_	P.O. Box 3	524// Address)		
	Palm Coast, F (City/State	FL 32/35 e/ and Zip Code)	 	
For further information concerning this matter, please call:				
·	ame of Contact Person) eck for the following amount:	at (<u>386</u>) <u>445</u> (Area Code & Daytime	Telephone Number)	
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ā E	Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corpo	rations	

Tallahassee, FL 32314

Tallahassee, FL 32399

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION

FILED

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SUNSHINE VETERINARY SERVICES, P.A. TALLAHASSEE, FLORIDA

Document No.:P05000037448 Filed on March 11, 2005.

Pursuant to the provisions of Section 607, et. al., Florida Statutes, this Corporation adopts the following amended Articles of Incorporation:

ARTICLE I. NAME

The name of the Corporation is:

Sunshine Veterinary Service, P.A.

ARTICLE II. ADDRESS

The street and mailing address of the principal office of the Corporation is 31 Westlawn Place, Palm Coast, FL 32164.

ARTICLE III. PURPOSE

The general nature of the business to be transacted by this corporation is mobile veterinary care.

ARTICLE IV. SHARES

The Corporation is authorized to issue 1,000 shares.

ARTICLE V. REGISTERED AGENT AND OFFICE

The registered agent and office for this Corporation shall be Catherine Sheffield, 31 Westlawn Place, Palm Coast, FL 32164, to accept service of process within this State as to this Corporation.

I certify that I am familiar with and accept the responsibilities of registered agent.

Catherine Sheffield

ARTICLE VI. INCORPORATOR

The name and address of the incorporator is:

Catherine Sheffield 31 Westlawn Place Palm Coast, FL 32164

Catherine Sheffield

STATE OF FLORIDA: COUNTY OF FLAGLER:

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I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared CATHERINE SHEFFIELD, known by me to be the person described as Incorporator or who furnished her driver's license as identification, and who executed the foregoing Articles of Incorporation, and acknowledged before me that she subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above this ______ day March, 2005.

Notary Public, State of Florida My commission expires: D. W. DUNCAN
MY COMMISSION # DD 255754
EXPIRES: February 8, 2008
Bonded Thru Notary Public Underwriters