

PD5000/29334

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

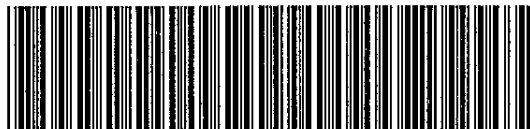
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Certified Copies _____

Certificates of Status _____

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03/20/05--01010-022 **128.75

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 SEP 20 PM 3:39

MRS
9/20

TRANSMITTAL LETTER

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

SUBJECT: Transfer corporation from California to Florida
name of corp = Eileen Gesoff, Dmn Inc

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	<u>\$78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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FROM: Eileen Gesoff
Name (printed or typed)

1402 stallion Drive
Address

Loxahatchee Fl 33470
City, State & Zip

561 753 5506
Daytime Telephone Number

CERTIFICATE OF DOMESTICATION

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, Eileen Gesoff, president
(Name) (Title)

05 SEP 20 PM 3:39

of Eileen Gesoff, DVM, Inc a foreign corporation,
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was 2/13, 2003.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was California.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Eileen Gesoff DVM INC.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is Eileen Gesoff DVM INC.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was California.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Eileen Gesoff, of Eileen Gesoff, DVM, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 15 day of September, 2005.

Eileen Gesoff

(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 SEP 20 PM 3:39

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Eileen Gesoff Dvm, Inc

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

*1402 Stallion Drive
Loxahatchee Fl 33470*

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Veterinary medicine

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

\$ 10,000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Eileen Gesoff, Dvm - president, owner

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

*Eileen Gesoff, Dvm
1402 Stallion Dr.
Loxahatchee, Fl 33470*

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

*Eileen Gesoff Dvm
1402 Stallion Dr. Loxahatchee, Fl 33470*

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 AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Eileen Gesoff

Signature/Registered Agent

9/15/05

Date

Eileen Gesoff

Signature/Incorporator

9/15/05

Date