P0500164043

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: <u>Hudson Veterinary Services, Inc.</u>				
DOCUMENT NUMBER: <u>P0500016</u> 4	1043			
The enclosed Articles of Amendment and fee a	are submitted for filing.			
Please return all correspondence concerning th	is matter to the following:			
· · · · · · · · · · · · · · · · · · ·	3 Dean Shamsi of Contact Person)			
(Hame	or contact reison,			
	n Veterinary Services, Inc.			
(Fi	rm/ Company)			
87	21 SW Otter Trail			
	(Address)			
	rcadia, FL 34266			
(City/S	State and Zip Code)			
For further information concerning this matter,	, please call:			
B Dean Shamsi	at (<u>612</u> <u>598-277</u>	7		
(Name of Contact Person)	(Area Code & Daytim	e Telephone Number)		
Enclosed is a check for the following amount r	nade payable to the Florida De	partment of State:		
\$35 Filing Fee \$43.75 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)		
Mailing Address	Street Address			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations	3		
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center C	'ircle		
1 ananassee, 1 L 32314	Tallahassee, FL 32301	JH OIC		



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 1, 2009

B DEAN SHAMSI 8721 SW OTTER TR ARCADIA, FL 34266

SUBJECT: HUDSON VETERINARY SERVICES, INC.

Ref. Number: P05000164043

We have received your document for HUDSON VETERINARY SERVICES, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 809A00022644

The date has been modified on the form. Thanks.

B Dean S.

RECEIVED

9 JUL 15 AM 8: 0

ECRETARY OF STATE
LUAHASSEE. FLORIG

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Articles of Amendment to Articles of Incorporation of

	<u>'eterinary Serv</u>		, 1 0
(Name of Corporation as cu	rrently filed with	the Florida Dept. of State)	
Pi	05000164043	7	
	lumber of Corporati	ion (if known)	5 5 S
Number of the manifeless of action (07)	1006 Florido Statur	And the Florida Burds Comment	100 Ca
ursuant to the provisions of section 607.1 ollowing amendment(s) to its Articles of Inc.		tes, this Florida Proju Corpora	adopts ti
• ,,	•		
. If amending name, enter the new name	e of the corporation	<u>n;</u>	
Sunny Coast Veterinary, Inc.			
he new name must be distinguishable incorporated" or the abbreviation "Corp Co". A professional corporation nessociation," or the abbreviation "P.A."	.," "Inc.," or Co.		Inc," or
B. Enter new principal office address, if a	ipplicable;	8721 SW Otter Trail	
Principal office address <u>MUST BE A STR</u>		Arcadia, Fl 34266	_
Enter new mailing address, if applica (Mailing address MAY BE A POST OF		8721 SW Otter Trail	
(Manning and ess MAY DE ATOST OF	FICE BOX	Arcadia, FL 34266	
			
. If amending the registered agent and/o new registered agent and/or the new r			me of the
		dress:	me of the
new registered agent and/or the new r	egistered office add	dress:	me of the
new registered agent and/or the new r	B Dean Shamsi 8721 SW Otter	dress:	me of the
Name of New Registered Agent:	B Dean Shamsi 8721 SW Otter	Trail ida street address)	ame of the

Signature of New Registered Agent, if changing

position.

If amending the Officers and/or, Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	Name	<u>Address</u>	Type of Action
Presiden	B Dean Shamsi	8721 SW Otter Trail Arcadia, FL 34266	
<u>VP</u>	Raymond Keith Hudson	8721 SW Otter Trail Arcadia, FL 34266	Add Remove
(attach add We would als Carla Franche	ng or adding additional Articles, en litional sheets, if necessary). (Be sp to like to change the current president eville, DVM. The new name is her current position as president should also be considered.	pecific) 's name from Carla Francheville i	
provision	endment provides for an exchange, is for implementing the amendment applicable, indicate N/A)		
44-48-40-4			

•	· June 25th, 2009 BDS
The date of each amendmen	nt(s) adoption: July 1st, 2009 (for all amendments)
Effective date <u>if applicable</u> :	July 1st, 2009 (for all amendments) (no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	vere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):
"The number of vote	es cast for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/w action was not required.	vere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/waction was not required.	vere adopted by the incorporators without shareholder action and shareholder
Dated_Jun	e 22nd, 2009
Signature _	
se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)
	Carla Francheville, DVM
	(Typed or printed name of person signing)
	Chief Veterinary Officer
	(Title of person signing)