| Y | \mathcal{O} | Florida Department of State Division of Corporations Electronic Filing Cover Sheet | |
|----------|----------------------|--|---------------|
| | Note: Please j | print this page and use it as a cover sheet. Type the fax audit number (on the top and bottom of all pages of the document. | shown below) |
| | | (((H21000200440 3))) | |
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| RECEIVED | From: A A P | <pre>ivision of Corporations ax Number : (850)617-6380 cccount Name : SPIEGEL & UTRERA, P.A. ccount Number : FCA000000001 hone : (305)854-6000 ax Number : (305)860-2076</pre> | 61 APH 1201 |
| | d 61 | ter the email address for this business entity to be used for fur annual report mailings. Enter only one email address please.** Email Address: | ture File 23 |
| | 2021 MAY | MERGER OR SHARE EXCHANGE CARING HANDS ANIMAL HOSPITAL INC. | <u></u> |
| | | Certificate of Status0Certified Copy0Page Count03Estimated Charge\$70.00 | MAY 20 2021 |
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Electronic Filing Menu

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Corporate Filing Menu

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Help

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| • ARTIC | LES OF M | ERGER | A CALL |
| | | | AS CALL |
| 1 | | | |
| he following articles of merger are submitted ursuant to section 607.1105, Florida Statutes. | | th the Florida Busine | |
| IRST : The name and jurisdiction of the sur | viving entity: | | |
| lame | Jurisdiction | Entity Type | Document Number (If known/ applicable) |
| Caring Hands Animal Hospital Inc. | FL | Corp. | |
| | | | |
| | | | |
| ECOND: The name and jurisdiction of each | n <u>mcrging</u> eligible | entity: | |
| · · · | n <u>merging</u> eligible Jurisdiction | entity: <u>Entity Type</u> | Document Number |
| l <u>ame</u> | | | Document Number (If known/ applicable) |
| l <u>ame</u> | Jurisdiction | Entity Type | |
| l <u>ame</u> | Jurisdiction | Entity Type | |
| lame | Jurisdiction | Entity Type | |
| lame | Jurisdiction | Entity Type | |
| ECOND: The name and jurisdiction of each | Jurisdiction | Entity Type | |
| lame aring Hands Animal Hospital of Live Oak Inc. | <u>Jurisdiction</u> FL | Entity Type Corp. | (lf known/ applicable) |
| iame aring Hands Animal Hospital of Live Oak Inc. | <u>Jurisdiction</u> FL | Entity Type Corp. | (lf known/ applicable) |
| iame Faring Hands Animal Hospital of Live Oak Inc. | <u>Jurisdiction</u> FL | Entity Type Corp. | (lf known/ applicable) |
| <u>tame</u> Caring Hands Animal Hospital of Live Oak Inc. | <u>Jurisdiction</u> FL | Entity Type Corp. | (lf known/ applicable) |
| <u>vame</u> | <u>Jurisdiction</u> FL | Entity Type Corp. | (lf known/ applicable) |

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FOURTH: Please check one of the boxes that apply to surviving entity:

- This entity exists before the merger and is a domestic filing entity.
- This entity exists before the merger and is not authorized to transact business in Florida.
- This entity exists before the merger and is a domestic filing entity, and its Articles of Incorporation are being amended as attached.
- This entity is created by the merger and is a domestic corporation, and the Articles of Incorporation are attached.
- This entity is a domestic eligible entity and is not a domestic corporation and is being amended in connection with this merger as attached.
 - This entity is a domestic eligible entity being created as a result of the merger. The public organic record of the survivor is attached.
- This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.
- **<u>FIFTH:</u>** Please check one of the boxes that apply to domestic corporations:
- The plan of merger was approved by the shareholders and each separate voting group as required.
- \square The plan of merger did not require approval by the shareholders.
- SIXTH: Please check box below if applicable to foreign corporations
- The participation of the foreign corporation was duly authorized in accordance with the corporation's organic laws.

SEVENTH: Please check box below if applicable to domestic or foreign non corporation(s).

| | Participation of the domestic or foreign non corporation(s) was duly authorized in accordance with each of suc cligible entity's organic law. | h |
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<u>EIGHTH:</u> If other than the date of filing, the delayed effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State:

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

| NINTH: Signature(s) for Each Party: | | Typed or Printed | |
|--|------------------|----------------------------|--|
| Name of Entity/Organization: | Signature(s): | Name of Individual: | |
| Caring Hands Animal Hospital Inc. | Horse Adotate | - Marie Leslie-Schretzmann | |
| Caring Hands Animal Hospital of Live Oak Inc. | Marie Jule Stile | - Marie Leslie-Schretzmann | |
| | 21.00 | | |
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Corporations:

General partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships: Limited Liability Companies:

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Chairman, Vice Chairman. President or Officer (If no directors selected, signature of incorporator.) Signature of a general partner or authorized person Signatures of all general partners Signature of a general partner Signature of an authorized person

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