

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H07000289359 3)))



H070002893593ABCA

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : WEAVER & MCCLENDON, PA.
Account Number : 073777002313
Phone : (863) 676-6000
Fax Number : (863) 678-1515

FLORIDA PROFIT/NON PROFIT CORPORATION

Bumps & Bruises Veterinary Services, PA

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 DEC -3 AM 8:57

APPROVED
AND
FILED

Electronic Filing Menu

Corporate Filing Menu

Nov. 30. 2007 5:22PM

No. 0243 P. 2
07 DEC -3 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

ARTICLES OF INCORPORATION
OF
BUMPS & BRUISES VETERINARY SERVICES, P.A.

The undersigned, being a natural person *sui juris* and a subscriber to the shares of the Corporation to be organized hereunder, for the purpose of forming a corporation under Fla. Stat. Ch. 621, does hereby adopt the following Articles of Incorporation.

ARTICLE I

The name of the Corporation is **BUMPS & BRUISES VETERINARY SERVICES, P.A.**

ARTICLE II

The term of existence of the Corporation is perpetual.

ARTICLE III

The nature of the business and the objects and purposes for which the Corporation is organized is to practice veterinary services and to engage in such activities as are permitted by the Professional Service Corporation Act, Fla. Stat. Ch. 621.

ARTICLE IV

The principal office of the corporation shall be 3992 Estepona Avenue, Doral, FL 33178,

ARTICLE V

The street address and mailing address of the initial registered office of the corporation shall be 240 East Park Avenue, Lake Wales, FL 33853, and the name of the initial registered agent at that address shall be **JAMES M WEAVER**.

ARTICLE VI

The aggregate number of shares which the Corporation has authority to issue is One Thousand (1,000) shares, all of which shall be common shares with par value of One Dollar (\$1.00) per share.

ARTICLE VI

The property and business of the Corporation shall be managed and controlled by its shareholders acting in lieu of a board of directors. The name and address of the initial shareholder is:

NAME

RESIDENCE

LISA S. BUMP

3992 Estepona Avenue
Doral, FL 33178

(((H07000289359 3)))

ARTICLE VII

The name and place of residence of the incorporator are as follows:


NAME

ADDRESS

LISA S. BUMP

3992 Estepona Avenue
Doral, FL 33178

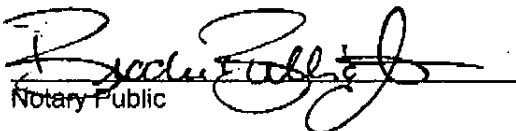
IN WITNESS WHEREOF, I have hereunto set my hand on November 30, 2007.



LISA S. BUMP, Incorporator

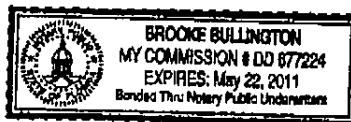
ACKNOWLEDGMENT

This instrument was acknowledged under oath before me in Polk County, Florida, on November 30, 2007, by **LISA S. BUMP**, personally known to me ☒, or driver's license verified identity ☐.



Notary Public

Instrument Preparer:
James M. Weaver, FBN 212792
Weaver & McCLENDON, PA
240 East Park Avenue
Post Office Box 466
Lake Wales, FL 33859-0466
863/676-6000



REGISTERED AGENT CERTIFICATE

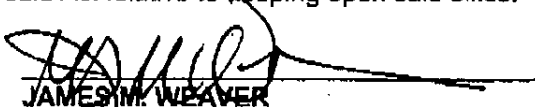
THIS CERTIFICATE DESIGNATES THE PRINCIPAL PLACE OF BUSINESS FOR THE SERVICE OF PROCESS WITHIN THIS STATE AND NAMES THE AGENT UPON WHOM PROCESS MAY BE SERVED.

The following is submitted in compliance with Fla. Stat. § 48.091:

BUMPS & BRUISES VETERINARY SERVICES, P.A., desiring to organize and incorporate under the laws of the State of Florida with its principal office and its registered office as indicated in the Articles of Incorporation, and located in the City of Lake Wales, County of Polk, State of Florida, has named **JAMES M. WEAVER** of 240 East Park Avenue, Lake Wales, FL 33853, as its registered agent to accept service of process within this State.

ACKNOWLEDGMENT

Having been named to accept service of process for the above Corporation at the place designated in the Articles of Incorporation and this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to keeping open said office.


JAMES M. WEAVER
Registered Agent

07 DEC -3 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

(((H07000289359 3)))