

P 11000106817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

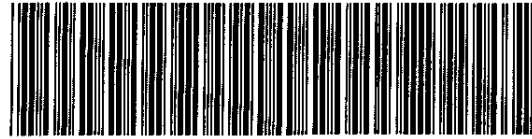
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

6408-
W11000058386



200213856022

200213856022
11/15/11--01040--001 **78.75

2011 DEC 16 AM 11:53

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12/19/11

COVER LETTER

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

SUBJECT: Miami Gardens Animal Clinic, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Amy Livingstone
Name (Printed or typed)
304 Indian Trace (#227)
Address
Weston, FL 33326
City, State & Zip
(954) 328-0497
Daytime Telephone number
Amylivingstone127@gmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 DEC 16 AM 11:55



RECEIVED

16 DEC 16 AM 10:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 17, 2011

AMY LIVINGSTONE
304 INDIAN TRACE #227
WESTON, FL 33326

SUBJECT: MIAMI GARDENS ANIMAL CLINIC, INC
Ref. Number: W11000058386

*Please see
attached articles
per your instructions.
They do include an
effective date of
1-1-12
Thanks!*

We have received your document for MIAMI GARDENS ANIMAL CLINIC, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 011A00026097

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 DEC 16 AM 11:53

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

EFFECTIVE DATE
01/01/12

ARTICLE I NAME

The name of the corporation shall be: Miami Gardens Animal Clinic, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
Amy Livingstone
1001 Lakeview Dr. (unit 311)
Weston, FL 33326

Mailing address, if different is:
Amy Livingstone
304 Indian Trace (#227)
Weston, FL 33326

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
operation of an animal clinic

SECRETARY OF STATE
DIVISION OF CORPORATION
2011 DEC 16 AM 11:53

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Address: _____
Name and Title: _____ Address: _____
Name and Title: _____ Address: _____
Name and Title: _____ Address: _____
Name and Title: _____ Address: _____
Name and Title: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Amy Livingstone
Address: 1001 Lakeview Dr. (unit 311)
Weston, FL 33326

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Amy Livingstone
Address: 304 Indian Trace (#227)
Weston, FL 33326

Article VIII - Effective Date shall be January 1st, 2012
Having been named as registered agent 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

Amy Livingstone
Required Signature/Registered Agent

12-9-11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Amy Livingstone
Required Signature/Incorporator

12-9-11
Date