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Division of Corporations

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## FLORIDA PROFIT/NON PROFIT CORPORATION NVA HILLSBORO VETERINARY MANAGEMENT, INC.

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## **COVER LETTER**

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SUBJECT: N	/A Hillsboro Veterinary Managem	nent, Inc.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an	original and one (1) copy of the art	icles of incorporation and	d a check for:
□\$70.00 Filing Fo	□\$78.75 se Filing Fee & Certificate of Status	\$78.75  Filing Fee  & Certified Copy  ADDITIONAL CO	& Certificate of Status
FROM:	Suzanne M. Hoffman		
	Name	e (Printed or typed)	
	Katten Muchin Rosenman LLP/5	-	Suite 1900
		Address	
	Chicago, IL 60661-3693		<del></del>
	City,	State & Zip	
	312-577-8306		
	Daytime T	elephone number	
	sshulman@nvanet.com		
•	E-mail address: (to be use	d for future annual report	notification)

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

4/005

Fax Server

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

<u>ARTICLE II</u>	PRINCIPAL OFFICE Principal street address	Mailing	address, if different is:
2	9229 Canwood, Suite 100		
<del>-</del>	Agoura Hills, CA 91301		
ARTICLE III	PURPOSE		
	hich the corporation is organized is:		
Any and all la	awful purposes for which corporations	s may be incorporated in Fl	orida.
-			
ARTICLE IV The number of share	SHARES res of stock is: 1,000 common, \$.01 par val	ue	
ARTICLE V	INITIAL OFFICERS AND/OR DIRE		
Name and Ti	ile: Gregory W. Hartmann - DIR & PRES 29229 Canwood, Suite 100	Name and Title:	
Annies.	Agoura Hills, CA 91301		
Name and Ti	itle: R. James Woloshyn - SEC/TREAS	Name and Title:	
Address:	29229 Canwood, Suite 100	Address:	
(	Agoura Hills, CA 91301	<u> </u>	
Mama and Ti	itle: Scott Shulman - ASST TREAS	Name and Title:	
Address:		Address:	
	Agoura Hills, CA 91301		<b>7</b> 0; <del></del>
		<del></del>	<u> </u>
ARTICLE VI	REGISTERED AGENT		
	rida street address (P.O. Box NOT accepta	able) of the registered agent is:	TAX
Name:			တွင်း မော်
Address:	1201 Hays Street Tallahassee, FL 32301		# P = #
	Taibunssee, F1. 37 tti	<del></del>	
ARTICLE VII	INCORPORATOR		
The <u>name and add</u> Name:	Iress of the Incorporator is: Suzanne M. Hoffman		. REC. "
Address:	525 West Monroe Street		<b>A</b> 53
11001000.	Chicago, IL 60661-3693		
Havina heen name	ed as registered agent to accept service of j	process for the above stated cor	poration at the place designated b
this certificate. I ar	n familiar with and accept the appointment	as registered agent and agree to	act in this capacity
Corporation Ser	vice Company .		, -
Ву:	Becky Peirce	Becky Peirce  Assistant Vice President	December 5, 2012
	Required Signature/Registered Ages	nt	Date
I archimile thin door	ment and affirm that the facts stated here	in nee true I am aware that th	e false information submitted in a
s suomii inis aocu document to the Di	ment and ajjirm ince the jucis stated here epartment of State constitutes a third degree	e felony as provided for in s.817.	155, F.S.
	- 1 1 <i>1</i>	· Anna i Anna Anna i Chaireann an Anna I	-
	* ' ' '		
	ALL MA NOT DOLL I	•	December 5, 2012