

P14000036710

(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



700259050387

2014 APR 24 AM 9:19
TALLAHASSEE
SUPERIOR COURT
CLERK OF COURT

FILED
14 APR 24 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/25/14

CSC.

CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 106011 4306193

AUTHORIZATION :

COST LIMIT :

\$ 78.75

ORDER DATE : April 24, 2014

ORDER TIME : 10:19 AM

ORDER NO. : 106011-005

CUSTOMER NO: 4306193

DOMESTIC FILING

NAME: NVA MARTIN DOWNS VETERINARY
MANAGEMENT, INC.

EFFECTIVE DATE:

XX _____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
_____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ CERTIFIED COPY

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: _____

FILED
14 APR 24 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: NVA Martin Downs Veterinary Management, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Suzanne M. Hoffman
Name (Printed or typed)
525 West Monroe Street, Suite 1900
Address
Chicago, IL 60661-3693
City, State & Zip
312-577-8306
Daytime Telephone number
sshulman@nvanet.com
E-mail address: (to be used for future annual report notification)

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

FILED
14 APR 24 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FILED
14 APR 24 AM 9:19
T. SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

NVA Martin Downs Veterinary Management, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different from

29229 Canwood Street, Suite 100

Agoura Hills, CA 91301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful purposes for which corporations may be incorporated under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gregory Hartmann - Director/President

Name and Title: _____

Address 29229 Canwood Street, Suite 100

Address: _____

Agoura Hills, CA 91301

Name and Title: R. James Woloshyn - Secretary/Treasurer

Name and Title: _____

Address 29229 Canwood Street, Suite 100

Address: _____

Agoura Hills, CA 91301

Name and Title: Scott Shulman - Asst. Treasurer

Name and Title: _____

Address 29229 Canwood Street, Suite 100

Address: _____

Agoura Hills, CA 91301

(conti.)

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

ARTICLE VI REGISTERED AGENT

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

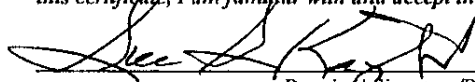
Name: Corporation Service Company
Address: 1201 Hays Street
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Suzanne M. Hoffman
Address: 525 West Monroe Street, Suite 1900
Chicago, IL 60661-3693

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



Required Signature/Registered Agent

4-24-14

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.



Required Signature/Incorporator

4/23/14

Date

FILED
14 APR 24 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA