

# P18000061419

Florida Department of State  
Division of Corporations  
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FLORIDA PROFIT/NON PROFIT CORPORATION

MOBILE MINIMALLY INVASIVE VETERINARY PROCEDURES INC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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JUL 16 2018



July 13, 2018

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FASTKIT CORP

SUBJECT: MOBILE MINIMALLY INVASIVE VETERINARY PROCEDURES (MMIVP) INC  
REF: W18000064323

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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) 245-6052.

Taylor B Collins  
Regulatory Specialist II  
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MOBILE MINIMALLY INVASIVE VETERINARY PROCEDURES INC.

ATX1

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

ARTICLE I NAME

The name of the corporation shall be: MOBILE MINIMALLY INVASIVE VETERINARY PROCEDURES INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address  
8375 SW 8 STREET

Mailing address, if different is:

MIAMI, FL 33144

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to transact any and all lawful business permitted under  
the laws of the United States of America and the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 500 shares at \$1.00 per value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RANDY DOMINGUEZ, PRESIDENT

Name and Title: \_\_\_\_\_

Address: 8375 SW 8 STREET

Address: \_\_\_\_\_

MIAMI, FLORIDA 33144

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

60

MOBILE MINIMALLY INVASIVE VETERINARY PROCEDURES INC

ATX1

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: RANDY DOMINGUEZ  
Address: 8376 SW 8 STREET  
MIAMI, FLORIDA 33144

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: RANDY DOMINGUEZ  
Address: 8376 SW 8 STREET  
MIAMI, FLORIDA 33144

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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** 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.

*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*

[Signature]  
Required Signature/Registered Agent:

7-11-18  
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.*

[Signature]  
Required Signature/Incorporator

7-11-18  
Date