P21000087443

	(Requestor's Name)			
	(Requestors Marrie)			
	(Address)			
(Address)				
	(City/State/Zip/Phone #)			
PICK-U	P WAIT	MAIL		
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	(Business Entity Name)			
	(Document Number)			
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Certified Copies	Certificates of S	Status		
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Special Instruction:	s to Filing Officer.			
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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com



ORDER FORM

TO Florida Department of State

FROM

Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE 12/8/2021

PRIORITY Regular Approval

OUR REF_#_(Order_ID#)] 979045

ORDER ENTITY_____PAUL HARPER, P.A.

	RFORM THE FOLLOWING SERVICES: RPER, P.A. (FL)
File the a	ached amendment and provide a certified copy.
NOTES:	ļ

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Articles of Amendment to Articles of Incorporation of

Paul Harper, P.A.
(Name of Corporation as currently flied with the Florida Dept, of State)
P21000087443
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:
A. If amonding name, enter the new name of the corporation:
Florida Veterinary Group, P.A.
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter now mailing address, if appticable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered arent and/or the new registered office address:
Name of New Registered Agent
(Florida street address) New Registered Office Address:
(City) (Zip Code)
New Registered Agent's Signature, If changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
Check if applicable [] The amendment(s) is/are being filed pursuant to s, 607.0120 (11) (e), F.S.

(Attach additional sheets, if necessary).	(Be specific)	
		
		
		-
. If an amendment provides for an excl	hange, reclassification, or cancellation of issued sha	1948
provisions for implementing the ame	endment if not contained in the amendment itself:	1133
(If not applicable, indicate N/A)		
	•	
		

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory Illing requirements, this da Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action	on and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	N.	
	(voling group)	
lvited	/6/21	
Signature	You for the Dung	
(By a select	director, president or other officer - if directors or officers have not been ed, by an incorporator - if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	Paul Harper, P.A.	
	(Typed or printed name of person signing)	···
	President	
	(Title of person signing)	