TRANSMITTAL LETTER of State

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

Tallanassee, FL 3231	1			
SUBJECT:	BeverlyHills Animal Hosp			
	(Proposed co	rporate name - must includ	e suffix)	
			9000026 -11/04/ ****123	9801047001
Enclosed is an original	l and one(1) copy of the articles	of incorporation and a	check for:	·
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	□ \$131.25 Filing Fee, Certified Cop & Certificate	*
		ADDITIONAL CO	PY REQUIRED	_
FROM: _	Robert J. Norton, I			
	Name (Printed or typed) Law Offices of Robert J. Norton, P.A.			
	126 E. Olympia Ave., Ste. 408			D 9
	Address LANCO TO			20 8 70 8
	Punta Gorda, FL 33950			200 +
	City, State & Zip			PH 3: 09
	(941) 639-0311			
	Daytime Telephone number			

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

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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

BeverlyHills Animal Hospital, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5019 S.W. Hull Ave. Arcadia, FL 34266

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ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 shares common - par value \$.10

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Edith S. Beverly 5019 S.W. Hull Ave., Arcadia, FL 34266

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Edith S. Beverly 5019 S.W. Hull Ave., Arcadia, FL 34266

Signature/Incorporator

10/29/98

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

Date