# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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### **ARTICLES OF INCORPORATION**

OF

#### TWIN CITIES ANIMAL HOSPITAL, INC.



#### **ARTICLE I - NAME**

The name of this corporation is TWIN CITIES ANIMAL HOSPITAL, INC.

#### **ARTICLE II - DURATION**

This corporation shall exist perpetually.

## **ARTICLE III - PURPOSE**

This corporation is organized for the purpose of transacting any and all lawful business.

#### **ARTICLE IV - CAPITAL STOCK**

This corporation is authorized to issue 1,000 shares of common stock having a par value of \$1.00. There shall be only one class of stock.

#### **ARTICLE V - PREEMPTIVE RIGHTS**

Every shareholder, upon the sale of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

## ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The name of the initial registered agent of this corporation and the street address of the initial registered office of this corporation are as follows: PAUL M. GRIMALDI, 1211 BAY LAKE LOOP, GROVELAND, FLORIDA 34736. The principal office address for the corporation is the same.

## ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) directors initially. The number of Directors may be either increased or diminished from time to time by the By-Laws but shall never be greater than (9) nine. The names and addresses of the initial directors of this corporation is:

PAUL M. GRIMALDI

1211 Bay Lake Loop Groveland, Fl 34736

LEOPOLDO BONATI

P.O. Box 1117 Altoona, FI 32702

#### **ARTICLE VIII - OFFICERS**

The officers of the corporation shall be a President and a Secretary/Treasurer who shall be elected annually and any other officers provided for in the By-Laws. The Secretary and Treasurer may be two offices. The names of the persons who are to serve as officers of the corporation until the first election are:

OFFICER
President/Vice President

NAME AND RESIDENCE Paul M. Grimaldi 1211 Bay Lake Loop Groveland, Fl 34736

Leopoldo Bonati P.O. Box 1117 Altoona, Fl 32702

## **ARTICLE IX - INCORPORATORS**

The names and addresses of the persons signing these Articles are PAUL M. GRIMALDI, 1211 BAY LAKE LOOP, GROVELAND, FLORIDA 34736 and LEOPOLDO BONATI, P.O. BOX 1117, ALTOONA, FLORIDA 32702.

IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation this <a href="27">27</a> day of May 1999.

PAUL M. GRIMALDI

EOPOLDO BONATI

STATE OF FLORIDA )
: SS.
COUNTY OF LAKE )

Before me, a Notary Public, duly authorized to take acknowledgments in the state and county set forth above, personally appeared PAUL M. GRIMALDI and LEOPOLDO BONATI, known to me to be the person who executed the foregoing Articles of Incorporation, and she acknowledged before me, that she executed those Articles of Incorporation.

**Notary Public** 

My commission expires:



Peggy L. Abraham
MY COMMISSION # CC581586 EXPIRES
September 2, 2000
BONDED THRU TROY FAIN INSURANCE, INC.

Secretary of State State of Florida Tallahassee, FL 32399

I hereby am familiar with and accept the duties and responsibilities as resident agent for TWIN CITIES ANIMAL HOSPITAL, INC. effective with the date of this incorporation. I will continue to act and serve in that capacity until such time as I notify you of my resignation from that function.

PAUL M. GRIMALDI

Attest:

LEOPÓLDO BONATI

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TALLAHASSEE, FLORID

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