TRANSMITTAL LETTER 700003071147---C -12/15/99--01063--005 *****78.75 *****78.75 Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314 LAKELAND VETERINARY HOS DITAL JUC. (Proposed corporate name - must include suffix) SUBJECT: Enclosed is an original and one(1) copy of the articles of incorporation and a check for : **\$87.50 3**\$78.75 \$78.75 \$70.00 Filing Fee, Filing Fee Filing Fee Filing Fee Certified Copy & Certified Copy & Certificate of Status & Certilicate of Status ADDITIONAL COPY REQUIRED FROM: LAKE LAND VETERINARY HOSPITAL, Name (Printed or typed) 3003 Hwy 98 S. ភ LAKELAND, FL 33803 City, State & Zip P ڢ) 665 - 1811 Daytime Telephone number 2

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

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.

(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 12/8/99 Date