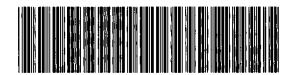
## 587907

(Re	questor's Name)	
(Ad	dress)	
. (Ad	dress)	
(Cit	ry/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ANIMAL MEDICAL CLINIC AT SAWGRASS VILLAGE INC
DOCUMENT NUMBER: 887907
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NIKOLAY H. NIKOLOV  Name of Contact Person
ANIMAL MEDICAL CLINIC AT SAWGRASS VILLAGE INC
Firm/ Company
8000 SAWGRASS VILLAGE CIRCLE
Address
PONTE VEDDA DEAGULEI 20000
PONTE VEDRA BEACH, FL 32082  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
NIKOLAY H. NIKOLOV at 904 273-9560
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee X \$43.75 Filing Fee & S52.50 Filing Fee Certificate of Status  Certificate of Status  (Additional copy is enclosed)  (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation

,	of	10	FED
ANIMAL MEDICAL CLINIC AT SAWGRASS VILLAG	E INC.	to JUL	19 AM O.
(Name of Corporation as curren	ntly filed with the	Florida Dept.	of State) 5. 15
<u>\$87907</u>		THE LINE S	SEE, FLORIDO
(Document Number	er of Corporation	(if known)	
ursuant to the provisions of section 607.1006, Florid llowing amendment(s) to its Articles of Incorporation		lorida Profit Co	rporation adopts the
If amending name, enter the new name of the c	orporation:		
		•	The new
obreviation "Corp.," "Inc.," or "Co.," or the designation are must contain the word "chartered," "professiona Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD	al association," or	•	·
morpul umaa aaa ooo <u>moo personneerse</u>	- ·		·
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX	X)	,	
	-	·	
If amending the registered agent and/or regist new registered agent and/or the new registered			enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida stre	et address)	•
<u> </u>			, Florida
	(Ci	ty)	(Zip Code)
ew Registered Agent's Signature, if changing Re			nhliantinns of the nositi
hereby accept the appointment as registered agent.	ı anı tamıllar With	ани ассері іпе (	obilgations of the position
01	o of Now Bosisto	and found if the	

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Dir/Sec NIKOLAY H. NIKOLOV 5090 PALM VALLEY RD X Add PONTE VEDRA BEACH, FL 3208 Rem Add Rem	
Rem	ove
Rem	ove
Rem	ove
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	1
Add	• • .
Rém	ove
E. If amending or adding additional Articles, enter change(s) here:	
(attach additional sheets, if necessary). (Be specific)	
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	•
	•
	,
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares.	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	•
	·····
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	. , ,

ANIMAL MEDICAL CLINIC AT SAWGRASS VILLAGE INC		59-3054304 ATX
The date of each amendment(s) adoption:	6/1/2010	<u> </u>
(date	o of adoption is required)	
Effective date <u>if applicable</u> :	6/1/2010	
(no more than 90 days afte	er amendment file date)	
Adoption of Amendment(s) (CHECK ONE	F) 30 (**)	
Adoption of American	one of the state	
X The amendment(s) was/were adopted by the shareholders was/were sufficient for approval.		t for the amendment(s
The amendment(s) was/were approved by the shareh must be separately provided for each voting group er	ntitled to vote separately on the a	nmendment(s):
"The number of votes cast for the amendment(	s) was/were sufficient for approv	/ai
by	4 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
(voting group)	•	
(voiling group)		
The amendment(s) was/were adopted by the incorpo action was not required.	rators without shárehólder áction	n and shareholder
		30 - 1 - 1 - 1
Dated		
Signature Mus		
	ner officer – if directors or officers h	
selected, by an incorporator — appointed fiduciary by that fidu	if in the hands of a receiver, trusted uclary)	, or other court
AHZOLAV LI AHZOLOV		
NIKOLAY H. NIKOLOV	inted name of person signing)	· · · ·
(Typed of pr	urren Harrie of hersoft siftinifi)	
•		•
•		
DIRECTOR/SECRETARY		