

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000058848

Entity Name: PET EMERGENCY AND REFERRAL CENTER, LLC

Current Principal Place of Business:

3579 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33403

Current Mailing Address:

3579 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33403 US

FEI Number: 61-1601159

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HANSON VETERINARY SURGERY ASSOCIATES, PLLC
3579 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33403 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name HANSON, STEVEN PDR
Address 2104 NE ROSEWALK TERRACE
City-State-Zip: STUART FL 34996

Title MGRM
Name THOMAS, SEAN JDR
Address 808 SE PARKWAY DR
City-State-Zip: STUART FL 34996

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN P. HANSON DVM

MGRM

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date