Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 : (850)521-1000 Phone

Fax Number : (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION NVA WESTCHASE VETERINARY MANAGEMENT, INC.

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

T. Burch OCT 2.0/2011

COVER LETTER

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

SUBJECT: N	/A Westchase Veterinary Manage	ement, Inc.			
	(PROPOSED CORPOR	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)		
Enclosed are an	original and one (1) copy of the ar	ticles of incorporation an	d a check for:		
□\$70.00 Filing Fe	S78.75 Filing Fee & Certificate of Status	⊠\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
		ADDITIONAL	OI I IEQUINED		
FROM:	Suzanne M. Hoffman				
	Name (Printed or typed)				
	525 West Monroe Street, Suite 1900				
		Address			
	Chicago, IL 60661-3693				
	City	, State & Zip			
	312-577-8306				
	Daytime '	Felephone number	····		
	sshulman@nvanet.com				
,	E-mail address: (to be use	ed for future annual report	notification)		

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the	corporation shall be:		
ARTICLE II	PRINCIPAL OFFICE Principal street address	Mailing address, if diffe	rent is:
	29229 Canwood Street, Suite 100		
	Agoura Hills, CA 91301		<u>Friq</u>
ARTICLE III	PURPOSE		100
	which the corporation is organized is:		E
Any and all law	tul purposes for which corporations may be incorp	orated under the laws of the State of Flori	
,			
ARTICLE IV The number of sl	SHARES hares of stock is: 1,000		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR		
	Title: Gregory Hartmann Director/President		
Address:	29229 Canwood Street, Suite 100 Ageura Hills, CA 91301		
	Agoula min, GA-71501		
Name and	Title: R. James Woloshyn Secretary/Treasurer	Name and Title:	
Address:	29229 Canwood Street, Suite 100	Address:	
	Agoura Hills, CA 91301	· · · · · · · · · · · · · · · · · · ·	
Name and	Title: Scott Shulman Asst. Treasurer	Name and Title:	
Address:	29229 Canwood Street, Suite 100	Address:	
	Agoura Hills, CA 91301		
ARTICLE VI		-	
	Porida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name: Address:	Corporation Service Company 1201 Hays Street	_	
Audiess.	Tallabassee, FL 32301	-	
ARTICLE VII	INCORPORATOR		
The <u>name and a</u>	eddress of the Incorporator is: Suzanne M. Hoffman		
Name: Address:	525 West Monroe Street, Suite 1900	_	
Address:	Chicago, IL 60661-3693	-	
this certificate, I	med as registered agent to accept service of process am familiar with and accept the appointment as reg Service Company	gistered agent and agree to act in this capa	plac e designated it city
Ву:	Palety Peince Assis	bani Vice President 10/20)/2011
	Required Signature/Registered Agent		Date
I submit this do document to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felon	e true. I am aware that the false informa ty as provided for in s.817.155, F.S.	tion submitted in a
	N 11		
Jua	men potar	10/1	9/2011
Suzanne M Ho	Required Signature/Incorporator		Date