

REQUEST FOR CERTIFICATION LETTER TO BE FILED WITH SECRETARY OF STATE

For: The Incorporators of a Foreign Professional Corporation: Certificate of Authority

From: The North Carolina Veterinary Medical Board

The North Carolina Veterinary Medical Board must certify to the Secretary of State of North Carolina that the ownership of all shares of stock in a foreign professional corporation is in compliance with the requirements of the Professional Corporation Act, Chapter 55B, and, must officially state that all shareholder(s) are licensed to practice veterinary medicine in North Carolina. The procedure is as follows:

FOREIGN PROFESSIONAL CORPORATION PROCESS

Attached is an application form to be completed and returned to the N.C. Veterinary Medical Board. This form requires the listing of all names of shareholders and the selection of a company name, physical address and mailing address located in North Carolina.

Return this form along with a copy of the Certificate of Existence required from home State's Corporation Division. Copy of Certificate of Existence and fee of \$150 must be submitted to the North Carolina Veterinary Medical Board before the Board office can issue a Certification Letter. Upon receipt and review, the Board will issue a Letter of Certification, which must be affixed to another copy of Certificate of Existence and filed with the Secretary of State by the incorporator as a foreign professional corporation.

Please note that forming a corporation is not the same process as the Practice Facility name approval. These are two separate issues that need to be addressed before providing veterinary services to the public. The N.C. Secretary of State approves corporation names only. These names can be different from the facility providing veterinary services. Failure to obtain a veterinary practice facility name approval and inspection from the Board could be a violation of the North Carolina Veterinary Practice Act.

List proposed name for the Foreign Professional Corporation:

(Name must include one of the following P.C, P.A., or Inc. or PLLC)

Address for the Foreign Professional Corporation

Physical Address: _____

City: _____ Zip Code: _____

County: _____ Telephone Number: _____

Mailing Address: _____

City: _____ Zip Code: _____

County: _____ Telephone Number: _____

List Name, Address and N.C. License number for all shareholders of Foreign Professional Corporation:

Name: _____ License Number _____

Address _____

Name: _____ License Number _____

Address _____

Name: _____ License Number _____

Address _____

Name: _____ License Number _____

Address _____

List Name(s) of Officer(s) responsible for this foreign professional corporation if applicable.

President: _____

Vice president: _____

Secretary: _____

Treasurer: _____

Please note the following:

- Submit copy of the Certificate of Existence do not send originals to Board office.
- Submit fee of \$150.00 made payable to the North Carolina Veterinary Medical Board.
- Foreign Professional corporations are renewed in December of each year thru NCVMB. Fee is \$150.00

North Carolina Veterinary Medical Board address is:

Mailing: P. O. Box 37549, Raleigh, N.C. 27627

To overnight use: 1611 Jones Franklin Road, Suite 106, Raleigh, NC 27606

Form is required to be notarized

The undersigned certifies that he/she is a stockholder of named foreign professional corporation and statements made in this form are true and accurate. The stockholder(s) are responsible for securing prior Board approval for amendments made to original foreign Incorporation. Stockholder(s) of above corporation understand that the foreign professional corporation process does not constitute a veterinary practice facility name approval. A veterinary practice cannot open, until the practice has had prior Board approval for use of a name and the required Board inspection has been completed prior to providing services to the public. Foreign Professional Corporation registration is valid until December 31 of each year upon renewal.

Signature of NC licensed officer

Date

Subscribed and sworn to before me this _____ day of _____, 200_____.

Notary Public Signature

My Commission Expires: _____

(Seal)