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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	-
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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B. BOSTICK JUN 1 3 2012

EXAMINER

COVER LETTER

****.

TO: Registration Section Division of Corporations	
SUBJECT: 109-111	l Glover, LLC
Name of Survivin	
The enclosed Certificate of Merger and fee(s) are	submitted for filing.
Please return all correspondence concerning this	matter to:
Peter A Flanagan	
Contact Person	
Simses & Associates PA Firm/Company	
400 Royal Palm Way Suite 304	
Address	
Palm Beach, FL 33480	12 JUH - 8
City, State and Zip Code	
pflanagan@simseslaw.com E-mail address: (to be used for future annual report	SOLUTION TO THE PROPERTY OF TH
E-man address. (to be used for future annual report	notification)
For further information concerning this matter, pl	lease call:
Peter A Flanagan at (
Name of Contact Person	Area Code and Daytime Telephone Number
Certified copy (optional) \$30.00	
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

Certificate of Merger For Florida Limited Liability Company

The following Certificate of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 608.4382, Florida Statutes.

<u>FIRST:</u> The exact name, form/entity type, and jurisdiction for each <u>merging</u> party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
109-111 Glover, LLC	Connecticut	LLC
109-111 Glover, LLC	Florida	LLC

SECOND: The exact name, form/entity type, and jurisdiction of the **surviving** party are as follows:

Name	<u>Jurisdiction</u>	Form/En	tity Type
109-111 Glover, LLC	Florida	LLC	Marie 1 Marie 1 Marie 1 Marie 1 Marie 1
112000075052			CO.

THIRD: The attached plan of merger was approved by each domestic corporation, limited liability company, partnership and/or limited partnership that is a party to the merger in accordance with the applicable provisions of Chapters 607, 608, 617, and/or 620, Florida Statutes.

FOURTH: The attached plan of merger was approved by each other business enti is a party to the merger in accordance with the applicable laws of the state, countrium jurisdiction under which such other business entity is formed, organized or incorporate the state of the state	ry or	
FIFTH: If other than the date of filing, the effective date of the merger, which can prior to nor more than 90 days after the date this document is filed by the Florida Department of State:	not be	
Date of filing	·	
SIXTH: If the surviving party is not formed, organized or incorporated under the I Florida, the survivor's principal office address in its home state, country or jurisdict as follows:	aws of tion is	
N/A		
SEVENTH: If the survivor is not formed, organized or incorporated under the law Florida, the survivor agrees to pay to any members with appraisal rights the amount which such members are entitles under ss.608.4351-608.43595, F.S.		
EIGHTH: If the surviving party is an out-of-state entity not qualified to transact business in this state, the surviving entity:		
a.) Lists the following street and mailing address of an office, which the Florida Department of State may use for the purposes of s. 48.181, F.S., are as follows:		
Street address: N/A	14 mg	
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	72 1 73 CO	4
		i Na.
Mailing address: N/A	 	¥ _{1, •} .
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b.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce obligations of each limited liability company that merged into such entity, including any appraisal rights of its members under ss.608.4351-608.43595, Florida Statutes.

NINTH: Signature(s) for Each Party:

	Typed or Printed
Name of Entity/Organization:	// Signature(s): / Name of Individual:
109-111 Glover, LLC	James K. Neff
	10 1 -10 N(VI)
	// AMA Mel-Sarmit P. Neff
	V

Corporations: Chairman, Vice Chairman, President or Officer

(If no directors selected, signature of incorporator.) Signature of a general partner or authorized person

General partnerships: Florida Limited Partnerships: Signatures of all general partners

Non-Florida Limited Partnerships: Signature of a general partner

Signature of a member or authorized representative Limited Liability Companies:

Fees:	For each Limited Liability Company:	\$25.00
	For each Corporation:	\$35.00
	For each Limited Partnership:	\$52.50
	For each General Partnership:	\$25.00
	For each Other Business Entity:	\$25.00

Certified Copy (optional): \$30.00

per conversation wil peter flanagan on 4-12-12, mr. James K. neff own's both merging LLC's and his signature is acceptable for both commence companies. He request not certificates 6-13-12

PLAN OF MERGER

follows: <u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
109-111 Glover, LLC	Connecticut	LLC
109-111 Glover, LLC	Florida	LLC
SECOND: The exact name, fo as follows:		
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
109-111 Glover, LLC	Florida	LLC
THIRD: The terms and condit Because the Members of the		
identity and percentage of sl	nare ownership, no new Me	ember interests in the LLC
shall be issued pursuant to t	his Merger. The number a	nd identities of the members
of the surviving LLC shall no	ot be affected by the merger	г.
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		~ N
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FOURTH:

A. The manner and basis of converting the interests, shares, obligations or other securities of each merged party into the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:
Each member interest in the merging companies shall be converted into a
member interest in the surviving company.
(Attach additional sheet if necessary)
B. The manner and basis of converting <u>rights to acquire</u> the interests, shares, obligations or other securities of each merged party into <u>rights to acquire</u> the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:
Any rights shall be converted on a one-to-one basis in accordance with each
members's proportional interest in the merged companies.
72
(Attach additional sheet if necessary)

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(A)	ttach additional sheet if necessary)	
	ttach additional sheet if necessary)	
IXTH: Other provisions, if	ttach additional sheet if necessary) f any, relating to the merger are as follows:	
IXTH: Other provisions, if		
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Business

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Last Report Y€



Business Inquiry

Business Inquiry Details

Business Name: 109-111 GLOVER LLC

Business Address: 117 GLOVER AVE., NORWALK, CT, 06850

Citizenship/State Inc: Domestic/CT

Business Type: Domestic Limited Liability Company

Date Inc/Register: Jun 27, 2005

Principals

Namu/Title: Business Address:

SUMMIT HOLDINGS LP MEMBER 117 GLOVER AVE., NORWALK, CT, 06850

Business Summary

Agent Name: 67-69 GLOVER, LLC

Agent Business Address: 117 GLOVER AVE., NORWALK, CT, 06850

Agent Residence Address: NONE

Back

Business Stat

Residence Address:

NONE

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