Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180003662673)))



H180003682673ABC6

| Note: DO | NOT hit the REFRESH/RELOAD button on your browser from this p | age. | œ | |
|----------|---|----------------|-------|-----|
| | Doing so will generate another cover sheet. | | 33 | -17 |
| To: | Division of Corporations Fax Number : (850)617-6380 | SSEE. | 28 PI | |
| From: | Account Name : C T CORPORATION SYSTEM | FLOSE FLOSE | 2: 4 | - |

Account Number : FCA000000023 Phone : (514)280-3338 Fax Number : (954)208-0845

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

Email Address:

MERGER OR SHARE EXCHANGE

Oasis Systems, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 09 |
| Estimated Charge | \$60.00 |

EFFECTIVE DATE

Electronic Filing Menu

Corporate Filing Menu

Help "

JAN 03 2019

S. YOUNG

Articles of Merger For Florida Profit or Non-Profit Corporation Into Other Business Entity

The following Articles of Merger are submitted to merge the following Florida Profit and/or Non-Profit Corporation(s) in accordance with s. 607.1109, 617.0302 or 605.1025, Florida Statutes.

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

| Name | <u>Jurisdiction</u> | Form/Entity Type |
|------------------------------------|----------------------------------|--|
| Human Solutions, Inc. | florida | Corporation |
| | | |
| | | ····· |
| | | |
| | | |
| SECOND: The exact name as follows: | , form/entity type, and jurisdic | tion of the <u>surviving</u> party are |
| <u>Name</u> | Jurisdiction | Form/Entity Type |
| Oasis Systems, LLC | Massachusetts | Limited Liability Company |

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, 605, 617, and/or 620, Florida Statutes.

1 of 7

FOURTH: The attached plan of merger was approved by each other business entity that is a party to the merger in accordance with the applicable laws of the state, country or jurisdiction under which such other business entity is formed, organized or incorporated.

FIFTH: If other than the date of filing, the effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State:

December 31, 2018 at 11:59pm

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

<u>SIXTH:</u> If the surviving party is not formed, organized or incorporated under the laws of Florida, the survivor's principal office address in its home state, country or jurisdiction is as follows:

| 24 Hartwell Avenue, Lexington, Massachusetts 02421 | |
|--|--|
| | |
| | |
| ************************************** | |
| | |
| | |

SEVENTH: If the surviving party is an out-of-state entity, the surviving entity:

- a.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce any obligation or the rights of dissenting shareholders of each domestic corporation that is party to the merger.
- b.) Agrees to promptly pay the dissenting shareholders of each domestic corporation that is a party to the merger the amount, if any, to which they are entitled under s. 607.1302, F.S.

EIGHTH: Signature(s) for Each Party:

| Name of Entity/Organization: | Signature(s): / Name of Individual: |
|------------------------------|-------------------------------------|
| Ousis Systems, LLC | Thomas J. Colatosti |
| Human Solutions, Inc. | Handle Thomas J. Colatosti |
| | 7 |
| | |

Chairman, Vice Chairman, President or Officer Corporations:

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

Signatures of all general partners Florida Limited Partnerships:

Non-Florida Limited Partnerships: Signature of a general partner

Limited Liability Companies: Signature of a member or authorized representative

\$35.00 Per Party Fees:

Certified Copy (optional): \$8.75

PLAN OF MERGER

| follows: Name | Jurisdiction | Form/Entity Type |
|--|--|------------------------------|
| | | |
| Human Solutions, Inc | Florida | Corporation |
| | | |
| | | |
| as follows: | form/entity type, and jurisdictio | |
| <u>Name</u> | Jurisdiction | Form/Entity Type |
| Oasis Systems, LLC | Massachusetts | Limited Liability Company |
| Inaccordancewiththeprovisions | ditions of the merger are as follo offheFloridaBusinessCorporationAs | etandtheMassachusettsLimited |
| Inaccordancewiththeprovisions Liability Company Act, Human Sc | | into Oasis Systems, LLC, the |
| Inaccordancewiththeprovisions Liability Company Act, Human Sc | oftheFloridaBusinessCorporationAs | into Oasis Systems, LLC, the |
| Inaccordancewiththeprovisions Liability Company Act, Human So separateexistenceofHumanSolu | oftheFloridaBusinessCorporationAs | into Oasis Systems, LLC, the |
| Inaccordancewiththeprovisions Liability Company Act, Human Sc separateexistenceofHumanSolu | oftheFloridaBusinessCorporationAs | into Oasis Systems, LLC, the |
| Inaccordancewiththeprovisions Liability Company Act, Human So separateexistenceofHumanSolu | oftheFloridaBusinessCorporationAs | into Oasis Systems, LLC, the |

| FO | | N I | 14. |
|------|---|------|-----|
| 1 () | v | 1. T | 11. |

| 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 each or other property is as follows: |
|---|
| Each share of Human Solutions, Inc. capital stock will be canceled. Each potstanding equity interest of |
| Ousis Systems, LLC will remain outstanding. |
| |
| |
| |
| |
| |
| |
| (Attach additional sheet if necessary) |
| B. The manner and basis of converting the <u>rights to acquire</u> the interests, shares, obligations or other securities of each merged party into the <u>rights to acquire</u> the interests, shares, obligations or others securities of the survivor, in whole or in part, into eash or other property is as follows: |
| Each share of Human Solutions, Inc. capital stock will be canceled. Each outstanding equity interest of |
| Oasis Systems, LLC will remain outstanding. |
| |
| |
| |
| |
| |
| |
| (Attach additional sheet if necessary) |

| partner is as fo | partnership is the survivor, the name and business address of each general allows: |
|-------------------------|--|
| Not applicable. | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | (Attach additional sheet if necessary) |
| | |
| | |
| | |
| UXTH: If a lach manager | imited liability company is the survivor, the name and business address of or managing member is as follows: |
| ach manager | imited liability company is the survivor, the name and business address of or managing member is as follows: npany, LLC, 24 Hartwell Avenue, Lexington, Massachusetts 02421 |
| ach manager | or managing member is as follows: |
| ach manager | or managing member is as follows: |
| ach manager | or managing member is as follows: |
| ach manager | or managing member is as follows: |
| ach manager | or managing member is as follows: |
| ach manager | or managing member is as follows: |
| ach manager | or managing member is as follows: |
| ach manager | or managing member is as follows: |
| each manager | or managing member is as follows: |

| SEVENTH: Any statements that are required by the laws under which each other business entity is formed, organized, or incorporated are as follows: |
|---|
| The name and Federal Employer Identification Number of the entities involved in the merger are: Oasis |
| Systems, LLC - 04-3382761; Human Solutions, Inc 59-3489930. The name and Federal Employer |
| Identification Number of the surviving entity is: Oasis Systems, LLC - 04-3382761. The dates of |
| formation of each entity involved in the merger are: Oasis Systems, LLC - November 19, 2010; Human |
| Solutions, Inc October 16, 1997. This Plan of Merger is on file at the place of business of the surviving |
| limited fiability company, the address of which is 24 Flartwell Ave., Lexington, MA 02421. A copy of |
| this Plan of Merger will be furnished by the surviving limited liability company, on request and without |
| (Confinued on attached addendum) |
| (Attach additional sheet if necessary) |
| EIGHTH: Other provision, if any, relating to the merger are as follows: |
| |
| |
| |
| |
| (Attach additional sheet if necessary) |

PLAN OF MERGER (Addendum)

SEVENTH: Any statements that are required by the laws under which each other business entity is formed, organized, or incorporated are as follows: (Continued from Plan of Merger)

cost, to any member of any domestic limited liability company or any person holding an interest in any other business entity that is to merge. The name and business address of each person authorized to execute on behalf of the surviving limited liability company, documents to be filed with the Florida Department of State is: Thomas J. Colatosti, 24 Hartwell Ave., Lexington, MA 02421. The name and business address of each person authorized to execute, acknowledge, deliver and record on behalf of the surviving limited liability company, any recordable instrument purporting to affect an interest in real property is: Thomas J. Colatosti, 24 Hartwell Ave., Lexington, MA 02421.