

N98000001519

(Requestor's Name)

(Address)

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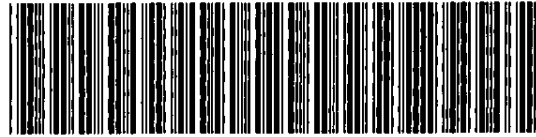
(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_



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03/02/12--01002--003 \*\*988.75

EFFECTIVE DATE 2/20/12

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 FEB 20 AM 11:18

Special Instructions to Filing Officer:

Helen Litsky GAVE

AUTHORIZATION BY PHONE TO  
titles listed on being filed simultaneously need. 2/20/12  
CORRECT 3, 4, 5, 6, 7 + 8 of Plan of Merger

DATE 3/1/12

REG. EXAM met

Office Use Only

FF \$170.00  
CC 8.75

B Tadlock MAR 02 2012

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Madi's Safe Haven Inc  
Name of Surviving Party

Please return all correspondence concerning this matter to:

Helen Litsky

Contact Person

Madi's Safe Haven Inc

Firm/Company

201 SW 63 AVE

Address

Plantation, FL 33317

City, State and Zip Code

mshcorp13@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Helen Litsky

Name of Contact Person

at ( 954 )

270-5015

Area Code and Daytime Telephone Number

Certified Copy (optional) \$8.75

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**Articles of Merger  
For  
Florida Profit or Non-Profit Corporation**

EFFECTIVE DATE

2/20/12

12 FEB 20 AM 11:18

FILED  
SECRETARY OF CORPORATION  
DIVISION OF CORPORATIONS

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 or 617.0302, Florida Statutes.

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

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
Madi's Safe Haven Corp	Broward County, FL	Non-profit N11-9828
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
Madi's Safe Haven Inc	Broward County, FL	Non-profit N98-1519

**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 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:

February 20, 2012

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**SIXTH:** 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:

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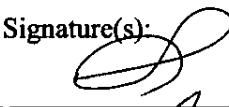
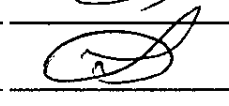
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**SEVENTH:** If the surviving party is an out-of-state entity, the surviving entity:

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):	Typed or Printed Name of Individual:
Madi's Safe Haven Inc		Director/President
Madi's Safe Haven Corp		Director/President

Corporations:	Chairman, Vice Chairman, President or Officer <i>(If no directors selected, signature of incorporator.)</i>
General Partnerships:	Signature of a general partner or authorized person
Florida Limited Partnerships:	Signatures of all general partners
Non-Florida Limited Partnerships:	Signature of a general partner
Limited Liability Companies:	Signature of a member or authorized representative

**Fees:** \$35.00 Per Party

**Certified Copy (optional):** \$8.75

**PLAN OF MERGER**

12 FEB 20 AM 11: 18  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
Madi's Safe Haven Corp	Broward County FL	Non-Profit

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

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
Madi's Safe Haven Inc	Broward County FL	Non-Profit

**THIRD:** The terms and conditions of the merger are as follows:

Madi's Safe Haven Corp will merge and be taken over by Madi's Safe Haven Inc,  
and use the new EIN 45-3548983. The separate existence of the merging  
party will cease and the surviving party shall be the surviving entity  
in the merger.

*(Attach additional sheet if necessary)*

**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:

Madi's Safe Haven Corp will merge and be taken over by Madi's Safe Haven Inc.

and use the new EIN 45-3548983.

Helen Litsky will remain the register, Director/President

The membership interests existing immediately prior to the merger shall convert into membership interests of the surviving party.

*(Attach additional sheet if necessary)*

B. The manner and basis of converting the rights to acquire the interests, shares, obligations or other securities of each merged party into the rights to acquire the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:

Madi's Safe Haven Corp will merge and be taken over by Madi's Safe Haven Inc.

and use the new EIN 45-3548983.

Helen Litsky will remain the register, Director/President

Any rights to acquire membership interests existing immediately prior to the merger shall convert into rights to acquire membership interests of the surviving party, if applicable.

*(Attach additional sheet if necessary)*

**FIFTH:** If a partnership is the survivor, the name and business address of each general partner is as follows:

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*(Attach additional sheet if necessary)*

**SIXTH:** If a limited liability company is the survivor, the name and business address of each manager or managing member is as follows:

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*(Attach additional sheet if necessary)*



**SEVENTH:** Any statements that are required by the laws under which each other business entity is formed, organized, or incorporated are as follows:

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*(Attach additional sheet if necessary)*

**EIGHTH:** Other provision, if any, relating to the merger are as follows:

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*(Attach additional sheet if necessary)*