P19000041838

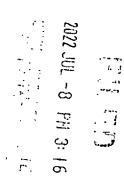
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COVER LETTER

TO:	Amendment Section Division of Corporations					
CLIDI	ECT: Medfiniti, Inc.					
20B1	Name of Surviving Entity	<i>;</i>	.			
	nclosed Articles of Merger and fee are submitte return all correspondence concerning this mate		ing:			
	chael J. Goeree					
	Contact Person				202	
Me	dfiniti, Inc.				2022 JUL -8	. 13
	Firm/Company			1,1	င္မာ	. 4*
119	N. 11th Street, Ste. 300	4			Pil 3: 16	4 17 4 17 4 18 17
	Address				<u>2</u>	
Tai	mpa, FL 33602			,	_	
	City/State and Zip Code					
mg	oeree@medfiniti.com					
H	-mail address: (to be used for future annual report notific	eation)				
For fu	rther information concerning this matter, please	e call:				
Mic	chael J. Goeree	At (813	458-7795			
	Name of Contact Person	· · · (Area Code & Daytime Teleph	ione Num	ber	
	Certified copy (optional) \$8.75 (Please send an ad	ditional copy	of your document if a cert	ified cop	y is re	quested
	Mailing Address:	Stree	et Address:			

IMPORTANT NOTICE: Pursuant to s.607.1622(8), F.S., each party to the merger must be active and current in filing its annual report through December 31 of the calendar year which this articles of merger are being submitted to the Department of State for filing.

Amendment Section
Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF MERGER

The following articles of merger are submitted in accordance with the Florida Business Corporation Ach pursuant to section 607.1105, Florida Statutes. **FIRST**: The name and jurisdiction of the **surviving** entity: Name **Jurisdiction** Entity Type Document Number (If known/applicable) Medfiniti, Inc. FL corporation P19000041838 **SECOND:** The name and jurisdiction of each <u>merging</u> eligible entity: Jurisdiction **Entity Type** Document Number Name (If known/ applicable) Medfiniti N.A., Inc. corporation P21000018663

THIRD: The merger was approved by each domestic merging corporation in accordance with s.607.1101(1)(b), F.S., and by the organic law governing the other parties to the merger.

Mb)

<u>FOUR</u>	TH: Please check one of the boxes that apply to surviving entity:			
☑	This entity exists before the merger and is a domestic filing entity.			
	This entity exists before the merger and is not authorized to transact business in Florida.			
	This entity exists before the merger and is a domestic filing entity, and its Articles of Incorporation are being amended as attached.			
	This entity is created by the merger and is a domestic corporation, and the Articles of Incorporation are attached.			
	This entity is a domestic eligible entity and is not a domestic corporation and is being amended in connection with this merger as attached.			
	This entity is a domestic eligible entity being created as a result of the merger. The public organic record of the survivor is attached.			
	This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.			
<u>FIFTH</u>	Please check one of the boxes that apply to domestic corporations:			
2	The plan of merger was approved by the shareholders and each separate voting group as required.			
	The plan of merger did not require approval by the shareholders.			
SIXTE	Please check box below if applicable to foreign corporations			
	The participation of the foreign corporation was duly authorized in accordance with the corporation's organic laws.			
SEVENTH: Please check box below if applicable to domestic or foreign non corporation(s).				
	Participation of the domestic or foreign non corporation(s) was duly authorized in accordance with each of such eligible entity's organic law.			

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	ling, the delayed effective date of the merger, whi ent is filed by the Florida Department of State:	ch cannot be prior to nor more
·	k does not meet the applicable statutory filing reque on the Department of State's records.	tirements, this date will not be
NINTH: Signature(s) for Each Party Name of Entity/Organization:	: Signature(s):	Typed or Printed Name of Individual:
Medfiniti, Inc.		Michael J. Goeree
Medfiniti N.A., Inc.		Robert I. Ellerman, Jr.
Corporations: General partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships: Limited Liability Companies:	Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporal Signature of a general partner or authorized per Signatures of all general partners Signature of a general partner Signature of an authorized person	utor.)