P960000 83992

(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)	
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COVER LETTER

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TO: Amendment Section	
Division of Corporations	Λο.
SUBJECT: Access - Ponte /	11c. P960000 \$ 3992 Surviving Party
Name of S	out viving rany
Please return all correspondence concerning	g this matter to:
Patrick J.	Jensen
Acce 35- Po	wer INC.
17/64 Dure	View Dr. Apt 106
Grand Haven City, State and Zip Code	MI 49417
	4 9 CCC SS- Panel. Com
For further information concerning this ma	tter, please call: (AV 616) 312-5390
Name of Contact Person	Area Code and Daytime Telephone Number
Certified Copy (optional) \$8.75	
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, Fl. 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#35 +8²⁵ #43²⁵

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.

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

Jurisdiction

Name

Form/Entity Type

Grand Haven MM	UC Michi	gan LCC
Grand Haven MM. Access-Power (NC.	Floria	la C Corp
SECOND: The exact name, form/entitas follows:	ty type, and jurisdiction	of the <u>surviving</u> party are
Access- Power, INC.	urisdiction FL	Form/Entity Type CORP =
		11. Sec2
THIRD: The attached plan of merger limited liability company, partnership a merger in accordance with the applicab 620, Florida Statutes.	ind/or limited partnership	p that is a party to the. 💍 🥽

EIGHTH: Signature(s) for Each Party:

		Typed or Printed
Name of Entity/Organization:	Signature(s):	Name of Individual:
Grand Hoven MM	LLC AMP	- Patrick J. Tense
Access-Paver, IN	c. MM	Patrick J. Jensen
Corporations:	Chairman, Vice Chairman, P	nature of incorporator.)
General Partnerships: Florida Limited Partnerships:	Signature of a general partne Signatures of all general partne Signature of a general partne	er or authorized person eners
Non-Florida Limited Partnerships: Limited Liability Companies:	Signature of a member or au	
Fees:	\$35.00 Per Pa	urty 50
Certified Copy (optional):	\$8.75	
		7. A. E. S.
		5. 6

PLAN OF MERGER

FIRST: The exact name, form/enti	ty type, and jurisdiction for ea	ach merging party are as	
follows: Nam <u>e</u>	<u>Jurisdiction</u>	Form/Entity Type	
		LLC	
brand Haven Mir	LLC Managan		
Grand Haven mm Acress Power INC	FLOKIDA	C CORP	
		2	
			19suma
			[]
SECOND: The exact name, form/e	entity type, and jurisdiction of	the <u>surviving</u> party are	garages g
as follows:		Form/Entity Type	; <u>; ; ;</u>
Name	<u>Jurisdiction</u>	romitently type))
Access- Fower IN	. Honda	CORP	
THIRD: The terms and conditions	of the merger are as follows:		_
Access-Paner, In	c. Mus purchas	ed frand the	n MM
	V 1D# 802		
	(One Dollar)	a 1 1)	MM
		verate as a	
Wholly owned	subsidiary of		<i>3</i> 、
The Asset Percha	a ocidend		2019
P 2:00 am ES	T Grand	Haven Mm	, , ,
	and now of	resates as bran	1d
tren MM - 1	Adugan 10# 8	0220565 WI	hich
s the same 10 h	Is Acress-Pares	- INC Makign	1111
(Attach a	dditional sheet if necessary)	Cann	OTEC
		XULLI	L 162)

FOURTH:

securities of of the surviv	f each merge vor, in whole	ed party into the e or in part, in	e interests, sha to eash or othe	shares, obligations tres, obligations or or property is as follo	others securit ows:		. 0
no	atha	1st or	Shac	Brance	Was	effeg	kd
<u> </u>	This	Muze	<u></u>	BSVance	·		
						<u> </u>	
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					*1	AH 10:	T. O
		(Attach add	litional sheet if	necessary)			
obligations shares, obligother proper	or other sec gations or of rty is as foll	urities of each thers securities ows:	merged party: s of the survivo	acquire the interests into the rights to accor, in whole or in particular of the state of the st	uire the inte rt, into cash o	or	eh S
		— (Attach ada	litional sheet ij	necessary)			

FIFTH: If a partnership is the survivor, the name and business address of each	general	
partner is as follows:		
N/A		_
		_
		_
		-
		_
		_
	7-4	19
		DEC
	-	ر ا –
(Attach additional sheet if necessary)		L
	*	<u>\$</u> ;
	· * (2
SIXTH: If a limited liability company is the survivor, the name and business a	ıddresstof	59
each manager or managing member is as follows:	>	
N/A		_
		-
		_
		-
		_
		_
		•••
		_
(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:
	* No share exchange or issuance was effected in Merger
7	& Frand Haven MM UC Will drap the UC
, *	Grand Haven MM will become 100% wholly owned
	by Access- Power, No.
X	Grand Haven MM has a plan of business #
	many assets to be disclosed
X	As B. Oct 18, 2019, Access Power, Inc. Mrs 24, 144, 12,
4	Shares of Common Stack Dut Standing (Quach additional sheet if necessary) Www. Standard EIGHTH: Other provision. if any, relating to the merger are as follows: Frankerco.
P	Our transfer Agent is Shindard Transfer 13 www. Standard
	EIGHTH: Other provision, if any, relating to the merger are as follows:
	A 40 5- Pover, IN Web 51k http://www.com
	My Excress Partition
X	Grand Haven MM will become partil
	The according of frees Hour, Mr.
	VO
	<u> </u>
	(Attach additional sheet if necessary)
	The state of the s
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