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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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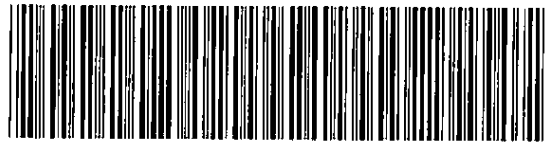
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECORDS OF STATE
TALLAHASSEE, FLORIDA

9565
36 Cert

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Accuform Manufacturing, Inc.

Name of Surviving Party

The enclosed Certificate of Merger and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Benjamin Walczak

Contact Person

Justrite Safety Group

Firm/Company

1751 Lake Cook Road, Suite 370

Address

Deerfield, IL 60015

City, State and Zip Code

bwalczak@justrite.com

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

For further information concerning this matter, please call:

Benjamin Walczak at (224) 7544857

Name of Contact Person

Area Code

Daytime Telephone Number

☒ Certified copy (optional) \$30.00

STREET ADDRESS:

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

MAILING ADDRESS:

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

**Articles of Merger
For
Florida Limited Liability Company**

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 605.1025, 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>
National Marker Companay Holdings, LLC	Delaware	LLC
National Marker Company	Rhode Island	Corporation

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>
Accuform Manufacturing, Inc.	Florida	Corporation

THIRD: The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

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FOURTH: Please check one of the boxes that apply to surviving entity: (if applicable)

- ☒ This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record are attached.
- ☐ This entity is created by the merger and is a domestic filing entity, the public organic record 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.
- ☐ This entity is a foreign entity that does not have a certificate of authority to transact business in this state. The mailing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 48, Florida Statutes is:

FIFTH: This entity agrees to pay any members with appraisal rights the amount, to which members are entitled under ss.605.1006 and 605.1061-605.1072, F.S.

SIXTH: If other than the date of filing, the delayed 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:

July 31, 2024

Note: 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.



SEVENTH: Signature(s) for Each Party:

Name of Entity/Organization:

National Marker Companay Holdings, LLC

National Marker Company

Signature(s):

Typed or Printed

Name of Individual:

Benjamin Walczak

Benjamin Walczak

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 incorporator.)

Signature of a general partner or authorized person

Signatures of all general partners

Signature of a general partner

Signature of an authorized person

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TALLAHASSEE, FLORIDA
DEPT OF STATE

<u>Fees:</u>	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	<u>Certified Copy (optional):</u>	\$30.00



State of Rhode Island
Department of State - Business Services Division

1
This legal document
should be typed.
All illegible
documents
will be REJECTED.

Instructions for Filing Application for Articles of Merger or Consolidation

of the General Laws of Rhode Island, 1956, as amended

*The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision.
This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.*

All filings are public records under RIGL , et seq. This means all information is available to the public by a variety of methods including, without limitations, inspections at our office, telephone inquiries and electronically through our online database.

How to complete the form:

Articles of Merger are required to be filed if at least one of the merging entities is a domestic entity.

Before submitting this form, ensure your entity has filed its final tax return and is in good standing with the RI Division of Taxation. You can confirm your tax status by contacting the RI Division of Taxation at tax.collections@tax.ri.gov or (401) 574-8941.

SECTION I:

- List the entities' ID number. The ID number can be found by looking up your entity in the .
For each of the merging or consolidating entities, list the entity name, entity type, and the state under which the entity is organized.
- The laws of the state under which each entity is organized permit such merger or consolidation.
- List the full name of the surviving or new entity and by which state the entity is to be governed.
- The Plan of Merger or Consolidation **MUST** be attached and has been duly authorized, approved and executed by each entity in the manner prescribed by the laws of the state under which each entity is organized.
- If the surviving entity's name has been changed by the merger, state the new name. If the surviving entity's name has not changed, leave this field blank.
- If the surviving or new entity is not qualified to conduct business in Rhode Island, it appoints the RI Department of State as its agent for service of process. List the address to which a copy of such service of process will be mailed.
- Any later date must be within 90 days of filing for business corporations and limited liability companies **OR** 30 days for non-profit corporations.

SECTION II (Business Corporations ONLY):

- If the surviving or new entity is to be governed by the laws of a state other than the State of Rhode Island, such surviving or new entity hereby agrees that it will promptly pay to the dissenting shareholders of any domestic corporation the amount, if any, to which they shall be entitled under the provisions of RIGL Chapter .

- As required by , the merging entity must certify that it has paid all fees and taxes. Confirm with the RI Division of Taxation that all tax debts have been satisfied by emailing tax.collections@tax.ri.gov.
- This section is **ONLY** to be completed if the merging corporation is a subsidiary of the surviving corporation.
 - List the name of the subsidiary corporation
 - List the date the plan of merger was mailed to shareholders of the subsidiary corporation.

SECTION III (Non-Profit Corporations ONLY):

- If the members of any merging or consolidating non-profit corporation are entitled to vote thereon, attach a statement for each such non-profit corporation which sets forth the date of the meeting of members at which the Plan of Merger or Consolidation was adopted, that a quorum was present at the meeting, and that the plan received at least a majority of the votes which members present at the meeting or represented by proxy were entitled to cast; **OR** attach a statement for each such non-profit corporation which states that the plan was adopted by a consent in writing signed by all members entitled to vote with respect thereto.
- If any merging or consolidating corporation has no members, or no members entitled to vote thereon, then as to each such nonprofit corporation attach a statement which states the date of the meeting of the board of directors at which the plan was adopted, and a statement of the fact that the plan received the vote of a majority of the directors in office.

SECTION IV (Partnerships ONLY):

- As required by RIGL and , the partnership must certify that it has paid all fees and taxes. Tax status can be verified by emailing tax.collections@tax.ri.gov.

SECTION V (Limited Liability Companies ONLY):

- As required by , the limited liability company must certify that it has paid all fees and taxes. Confirm with the RI Division of Taxation that all tax debts have been satisfied by contacting tax.collections@tax.ri.gov.