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Division of Corporations

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(((H100001668153)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

ACCOUNT Name : GASSMAN & ASSOCIATES, P.A.

Account Number : 075350000514

Phone : (727) 442-1200

Fax Number

: (727)443-5829

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Ema 1	Addr	
44062.	LAGUE	888:

MERGER OR SHARE EXCHANGE

HWEST FLORIDA ORAL AND FACIAL SURGERY, P.A.

	SCHUTI
	STATE
E	E.F.
17 Jan Alla	GECRETARY OF ALLAHASSEE, F

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$60.00

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EXAMINER

Electronic Filing Menu Corporate Filing Menu

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7/21/2010

Certificate of Merger For Florida Limited Liability Company

The following Certificate of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 608.4382, Florida Statutes.

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

DESEO AESTHETICS, LLC Florida	
N SO DELL	
LUB - 4544	company Sa
	SA 2
	STATE ORIU

Name Jurisdiction Form/Entity Type
SOUTHWEST FLORIDA ORAL AND
FACIAL SURGERY, P.A. Florida profit corporation

601398

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.

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is a party to	he attached plan of merger was approved by each other business enti- the merger in accordance with the applicable laws of the state, countr- ider which such other business entity is formed, organized or incorpor-	y or
	ter than the date of filing, the effective date of the merger, which cannote than 90 days after the date this document is filed by the Florida State:	not be
	surviving party is not formed, organized or incorporated under the lavivor's principal office address in its home state, country or jurisdiction	
	•	TALL SEC
		
		21 ASSE
SEVENTH: I Florida, the sur which such me	f the survivor is not formed, organized or incorporated under the laws vivor agrees to pay to any members with appraisal rights the amount, mbers are entitles under as 608.4351-608.43595, F.S.	OF STATE OF STATE
	the surviving party is an out-of-state entity not qualified to transact state, the surviving entity:	
	lowing street and mailing address of an office, which the Florida State may use for the purposes of s. 48.181, F.S., are as follows:	
Street address:	· · · · · · · · · · · · · · · · · · ·	
		···
Mailing addres	S;	
,		

b.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce obligations of each limited liability company that merged into such entity, including any appraisal rights of its members under ss.608.4351-608.43595, Florida Statutes.

NINTH: Signature(s) for Each Party:

Name of Enrity/Organization: DESEO AESTHÉTICS, LLC	Signature(s)	Typed or Printed Name of Individual: TINERFE J. TEJERA,	, .a.m.a
SOUTHWEST FLORIDA ORAL A FACIAL SURGERY, P.A.	No Jan Hoga	TIMOTHY D. HOGANY OF	M.D. THE
Corporations: General partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships: Limited Liability Companies:	Chairman, Vice Chairman, I (If no directors selected, sig Signature of a general partni Signature of all general partni Signature of a general partni Signature of a member or at	nature of incorporator.)	<u> </u>

Fees:	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

Certified Copy (optional): \$30.00

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PLAN OF MERGER

FIRST: The exact name, form/entity follows: Name	Jurisdiction	Form/Entity Type	.
DESEO AESTHETICS, LLC	Florida	limited liabilit	- A combany
	•	•	
			_
	- 		-
			-
SECOND: The exact name, form/ent	ity tyme, and inviddiction of	Fthe completion and com	SECRETAR
as follows:	my type, and justisalienten of	e me <u>aut vivide</u> party ate	
<u>Name</u> SOUTHWEST FLORIDA ORAL AND	<u>Jurisdiction</u>	Form/Entity Type	D N
FACIAL SURGERY, P.A.	Plorida	profit corporat	i c n 🕫
		4	
THIRD: The terms and conditions of	the merger are as follows:	ï	2 2 2
The Constituent Entities	hereby agree that	the Merging Enti	20
shall be merged with and	into the Surviving	Entity, and the	
Merging Entity and the Su	rviving Entity sha	ll be a single e	ntity.
The Surviving Entity shal	l be the Entity co	ntinuing after t	he
merger, and the separate	existence of the M	erging Entity sha	all
cease on the effective dat	e of this Merger.		
			•
			-
(Attach add	itional sheet if necessary)		•

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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 each or other property is as follows:	
Since all of the ownership interests of the Merging Entity are	currently
owned by the same Shareholders and in the the same proportion as	s the
ownership interests of the Surviving Entity, no additional cert	ificates
need to be issued by the Surviving Entity to reflect the owners!	hip
interests of the Shareholders after the effective date. The cer	itificates
representing the ownership interests of the Merging Entity shall	be
surrendered/cancelled on the effective date. The Ownership Inter	este of th
Surviving Entity shall be unaffected by the merger and shall constitute all of the outstanding ownership interests in the Sur	itinue to T
B. The manner and basis of converting rights to acquire the interests, shares, obligations or other securities of each merged party into 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:	8 20
Same as above.	,
	. ,
(Attach additional sheet if necessary)	,

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(Attach additional sheet	if necessary)	
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Other provisions, if any, relating to the m	erger are as follows:	133 50 A
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