

A 04000001834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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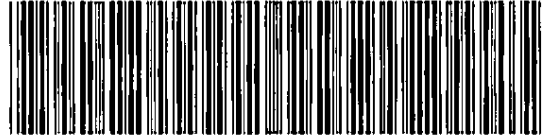
(Business Entity Name)

(Document Number)

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

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2022 SEP 29 PM 3:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 SEP 29 11:10:12

9/30/2022

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 980358 4305966

AUTHORIZATION :

COST LIMIT : \$ 105.00

ORDER DATE : September 29, 2022

ORDER TIME : 1:27 PM

ORDER NO. : 980358-010

CUSTOMER NO: 4305966

ARTICLES OF MERGER

BORDER CONSTRUCTION  
SPECIALTIES, LLC

INTO

WHITE CAP, L.P.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS: \_\_\_\_\_

**Certificate of Merger**  
**For**  
**Florida Limited Partnership or Limited Liability Limited Partnership**

2022-10-29 10:12

The following Certificate of Merger is submitted in accordance with s. 620.2108, 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>
Border Construction Specialties, LLC	Delaware	limited liability company
_____	_____	_____
_____	_____	_____
_____	_____	_____

**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>
White Cap, L.P.	Florida	limited partnership
_____	_____	_____

**THIRD:** The date the merger is effective under the governing laws of the

surviving party is: 11:59 PM ET on 10/2/2022.

**(NOTE:** If survivor is a Florida limited partnership or limited liability limited partnership, effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State. If survivor is not a Florida limited partnership or limited liability limited partnership, effective date shall be as provided in survivor's governing statute.)

**FOURTH:** The merger was approved by each party as required by its governing law.

**FIFTH:** If the surviving party is a foreign organization not qualified to transact business in this state, the street address and mailing address of an office which the Florida Department of State may use for the purposes of s. 620.2109(2), F.S., are as follows:

Street address:

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Mailing address:

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**SIXTH:** Other provisions, if any, relating to the merger:

**SEVENTH:** Signature(s) for Each Party:

(Merger must be signed by all general partners of Florida limited partnerships or limited liability limited partnerships and by the authorized representative of each other party.)

Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
Border Construction Specialties, LLC	<i>Susan V. Stucker</i>	Susan V. Stucker, Secretary
White Cap, L.P.	<i>Susan V. Stucker</i>	Susan V. Stucker, Secretary of Construction Supply Holdings, LLC, its General Partner

**Fees:** Filing Fees: \$52.50 Per Party  
Certified Copy: \$52.50 (Optional)  
Certificate of Status: \$8.75 (Optional)