AU 8000000000

(Requestor's Name) (Address)	-	2001377	774102
(Address) (City/State/Zip/Phone #)	-		
PICK-UP WAIT MAIL (Business Entity Name)	-		
(Document Number) Certified Copies Certificates of Status	- :		RECENT DEPARTMENT DIVISION DEC 18
Special Instructions to Filing Officer:			OF STATE OF
	EF	FECTIVE DATE 12 31 08	F 08 DEC 1 SECRETA TALLAHAS
Office Use Only	j	B. KOHR	FILED EC 18 PM ETARY OF WHASSEE, FI

DEC 1 8 2008

EXAMINER



EFFECTIVE DATE 12/31/08

ON SERVICE COMPANY		1
ACCOLINT NO	: 072100000032	DODEC FIL
REFERENCE		8
AUTHORIZATION	spell de man	SERVE
COST LIMIT	: \$ 105.00	10m2 23
ORDER DATE: December 18, 2008	8	
ORDER TIME : 12:13 PM	**PLEASE FILE 2ND***	
ORDER NO. : 831782-010		
CUSTOMER NO: 81093A		
ARTICLES OF	MERGER	
LEDIS FAMILY I PARTNERSHIP	LIMITED	
INTO	O	
LEDIS FAMILY I PARTNERSHIP	LIMITED	
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY		
CONTACT PERSON: Susie Knight		

EXAMINER'S INITIALS:

EFFECTIVE DATE 12 31 UV

Certificate of Merger of the Ledis Family Limited Partnership,



Form/Entity Type

A Florida Limited Partnership

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

Jurisdiction

Ledis Family Limited Partnership Michigan Family Limited Partnership

Ledis Family Limited Partnership Florida Family Limited Partnership

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>

The Ledis Family Limited Partnership Florida Family Limited Partnership

Third: The date of the merger is effective under the governing laws of the Surviving Party is:

December 31 ______, 2008.

Fourth: The merger was approved by each party as required by its governing laws.

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. 610.2109(2), F.S., are as follows: N/A

Sixth: Other provisions, if any, relating to the merger: None

Name

Seventh: Sign	nature(s) for each Party:
LEDIS FAMILY I A Michigan Limite	LIMITED PARTNERSHIP ed Partnership
GENERAL PART	NER:
•	evocable Living Trust, 1994, and any amendments thereto
BY:	Ledis Trustee
	NER: ocable Living Trust , 1994, and any amendments thereto
BY: <u></u>	
STATE OF FLOR	HDA Michigan)) ss. F Genesee)
The foregoing inst Jeffrey E. Ledis	rument was acknowledged before me on <u>December 11</u> . 2008, by (V) who is personally known to me or () who has produced, as identification.
[Seal]	
	Skannon M. Mushbur
	SHANNON M MASHBURN Notary Public, State of Michigan County of Genesee My Commission Expires Dec. 29, 2013 Acting in the County of

STATE OF FLORIDA Michigan)) cc
COUNTY OF LEE Genevee) ss.)
Andrea Ledis (/) who is pers	wledged before me on <u>December 11</u> , 2008, by conally known to me or () who has produced sidentification.
[Seal]	
	Shannon Mashbur
_	SHANNON M MASHBURN SHANNON M MASHBURN Notary Public, State of Michigan Notary Public State of Mi