Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : M. BURR KEIM COMPANY

Account Number : I19990000242

: (215)563-8113

Fax Number

: (215)977-9386

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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MERGER OR SHARE EXCHANGE AUTOTECH ANALYTICS, LP

Certificate of Status Certified Copy 0 Page Count 04 Estimated Charge \$105.00

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Corporate Filing Menu

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M BURR KEIM CO **(**(H160000622713)))

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16 MAR 10 AM 10: 32

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

FIRST: The exact name, form/entity typ follows:	e, and jurisdiction for ea	ach merging party are as
<u>Name</u>	Jurisdiction	Form/Entity Type
AUTOTECH ANALYTICS, LP	Pennsylvania	LP
	-	
SECOND: The exact name, form/entity tas follows:	type, and jurisdiction of	the <u>surviving</u> party are
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
AUTOTECH ANALYTICS, LP	Florida	LP A16000000134
THIRD: The date the merger is effective	under the governing la	ws of the
surviving party is:	·	
(NOTE: If survivor is a Florida limited p	partnership or limited lia	ability limited
partnership, effective date cannot be prior document is filed by the Florida Department	to nor more than 90 da	ys after the date this

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.

03/10/2016 13:10 FAX 215 977 9386

M BURR KEIM CO (((H160000622713)))

in this state, the stre	viving party is a foreign organization not qualified to transact business set address and mailing address of an office which the Florida e may use for the purposes of s. 620.2109(2), F.S., are as follows:
Street address:	
Mailing address:	
v	

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

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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: AUTOTECH ANALYTICS, LP (A PA LP)	Signatu	re(s):	Name of Individua GF, 1LC, Gener By Robert Holl Authorized Mem	al Partne: enshead,
AUTOTECH ANALYTICS, LP (A PL LP)	#	_	6P, LLC, Gener My Robert Holl Authorized Mem	
				-

Fees: Filing Fees: \$52.50 Per Party Certified Copy:

\$\$2,50 (Optional) Certificate of Status: \$8.75 (Optional)