A16000000633

(Requ	estor's Name)	
(Addre	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
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(Document Number)		
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STATE WAS STANDED INC.



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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2016

MATTHEW J. LAPOINTE, ESQ / WETHERINGTON HAMILTON, PA 1010 N. FLORIDA VENUE TAMPA, FL 33602 US

SUBJECT: SCHOENBAUM VENTURES LIMITED PARTNERSHIP Ref. Number: W16000069619

We have received your document for SCHOENBAUM VENTURES LIMITED PARTNERSHIP and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The surviving entity has not been filed yet.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis Regulatory Specialist II

Letter Number: 916A00021870

COVER LETTER

TO: Amendment Section **Division of Corporations** Schoenbaum Ventures Limited Partnership Name of Surviving Party The enclosed Certificate of Merger and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Matthew J. Lapointe, Esq. Contact Person Wetherington Hamilton P.A. Firm/Company 1010 N. Florida Avenue Address Tampa, FL 33602 City, State and Zip Code MattL@whhlaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Matthew J. Lapointe (Name of Contact Person) (Area Code and Daytime Telephone Number) Certified copy (optional) \$52.50 STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section Division of Corporations Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Certificate of Merger

For 2016 OCT -6 FM 3: 56

Name	<u>Jurisdiction</u>	Form/Entity Type
Schoenbaum Ventures Limited Partnership	Nevada	Limited Partnership
		-
SECOND: The exact name, form/entity as follows:		n of the surviving party are
Name A1600000006 33	<u>Jurisdiction</u>	Form/Entity Type
Schoenbaum Ventures Limited Partnership	Florida	Limited Partnership

(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:

Mailing address:

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

SECHETARY OF STADE DIVISION OF CORFORALLY

2016 OCT -6 PM 3: 56

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.)

		Typed or Printed
Name of Entity/Organization:	Signature(s):	Name of Individual:
Schoenbaum Ventures Limited Partnership (NV)	XMM /	Its G.P., Schoenbaum Corporation
	Must	By Jeffry Schoenbaum, President
	XV	
Schoenbaum Ventures Limited Partnership (FL)	\mathcal{M}	Its G.P., Schoenbaum Corporation
	Makeur -	By Jeffry Schoenbaum, President
	100'	

Fees: Filing Fees: \$52.50

\$52.50 Per Party

Certified Copy: Certificate of Status:

\$52.50 (Optional) \$8.75 (Optional)