A 18000000168

(Requestor's Name)
(Address)
(Address)
` ,
(City/State/Zip/Phone #)
(Olty/State/Zip/i Notic ")
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300312509933

05/01/18--01029--001 **105.00

S TALLENT MAY 0 4 2018

Merger



Cassandra S. Nelson, Associate Richard B. Comiter, Of Counsel Mirlene E. Dubreuze, Office Manager

2775 Surany Isles Boulevard, Suite 148
 North Miann Beach, Florida 33160
 305.932.2000 T • 305.932.6585 F

April 26, 2018

PERSONAL AND CONFIDENTIAL

Amendment Section
Florida Department of State Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Our Client: Lisa Esserman-Goldberg

Our File No.: 1989 (A.3)

Dear Sir/Madam:

Enclosed please find the Certificate of Merger signed by Lisa Esserman and Harris Goldberg, General Partners of the Goldberg-Esserman, LLLP and Harris Goldberg, Manager of the Goldberg-Esserman, LLC, General Partner. We have also enclosed a check for the filing fee in the amount of \$105.00. Should you have any questions, please feel free to contact me.

Alexandra Palacio Legal Assistant

Enclosures

VIA Federal Express

GACLIENTS\Esserman-Goldberg\Letters\2018-04-26 Trasnmittal- Merger does to State of Fludoex

COVER LETTER

TO: Amendment Section

Division of Corporations					
SUBJECT: GOLDBERG-ESSERMAN LIN	ITED PARTNERSHIP, LLLP				
Name of Surviving I	Party				
The enclosed Certificate of Merger and fee(s) are submitted for filing.					
Please return all correspondence concerning this ma	atter to:				
Jennifer E. Okcular, Esq.					
Contact Person NELSON & NELSON, P.A.					
Firm/Company					
2775 Sunny Isles Blvd., Suite 118					
Address					
North Miami Beach, FL 33160					
City, State and Zip Code					
Jennifer@estatetaxlawyers.com					
E-mail address: (to be used for future annual report notif	fication)				
For further information concerning this matter, plea	ise call:				
Jennifer Okcular at (30	05 ,932-2000				
Name of Contact Person Area	a Code and Daytime Telephone Number				
☐ Certified copy (optional) \$52.50					
STREET ADDRESS:	MAILING ADDRESS:				
Amendment Section	Amendment Section				
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327				
2661 Executive Center Circle	Tallahassee, FL 32314				
Tallahassee, FL 32301					

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

The following Certificate of Merger is submitted in accordance with s. 620.2108, Florida Statutes.

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

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
GOLDBERG ESSERMAN, LLLP	Florida	Limited Liability Limited Partnership
		A03000001353
		
		-
CECOND. The second of the seco		
SECOND: The exact name, form/entity as follows:	type, and jurisdiction	of the surviving party are
<u>Name</u>	Jurisdiction	Form/Entity Type
GOLDBERG-ESSERMAN LIMITED PARTNERSHIP, LLLP	Florida	Limited Liability Limited Partnership
		A 18 000000 168

<u>THIRD:</u> The date the merger is effective under the governing laws of the

surviving party is: April 30, 2018

(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 surviv in this state, the street	~ 1	<u> </u>	•		siness
Department of State n	nay use for the p	urposes of s. 62	0.2109(2), F.S.	, are as follows	S :
Street address:					
				···	
Mailing address:					
Maning address.					
		<u>. </u>			

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

4

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.)

Signature(s):	Typed or Printed Name of Individual:
Lisa Essermen	Lisa Esserman, General Partner
Har Solly	Harris Goldberg, General Partner
Har Sole	Harris Goldberg, Manager of
, ,	Goldberg-Esserman, LLC,
	General Partner
	•

Fees: Filing Fees: \$52.50 Per Party

Certified Copy: \$52.50 (Optional) Certificate of Status: \$8.75 (Optional)