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2018 SEP 12 AM 6: 04 SECRETARY OF STATE TALLAHASSEE, FL

Worden

R. WHITE SEP 13 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 383156 5017968
AUTHORIZATION :
COST LIMIT : \$70.00
ORDER DATE : September 12, 2018
ORDER TIME : 9:51 AM
ORDER NO. : 383156-005
CUSTOMER NO: 5017968
ARTICLES OF MERGER
THERMTECH SERVICES, INC.
INTO
MISTRAS GROUP, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:  CERTIFIED COPY
XX PLAIN STAMPED COPY
CONTACT PERSON: Roxanne Turner

EXAMINER'S INITIALS:

### **COVER LETTER**

TO: Amendment Section	
Division of Corporations	
SUBJECT: Mistras Group, Inc.	
	of Surviving Party
Please return all correspondence concer	ning this matter to:
Michael C. Keefe	
Contact Person	
Mistras Group, Inc.	
Firm/Company	
195 Clarksville Road	
Address	<del></del>
Princeton Junction, NJ 08550	
City, State and Zip Code	e
legal@mistrasgroup.com	
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this	matter, please call:
Susanne Weinstein	at ( 609 ) 716-4033
Name of Contact Person	Area Code and Daytime Telephone Number
Certified Copy (optional) \$8.75	
STREET ADDRESS:	MAILING ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

### FILED

2018 SEP 12 AM 6: 04

## Articles of Merger For SECRETARY OF STATE Florida Profit or Non-Profit Corporation TALL AMASSEE. FL Into Other Business Entity

The following Articles of Merger are submitted to merge the following Florida Profit and/or Non-Profit Corporation(s) in accordance with s. 607.1109, 617.0302 or 605.1025, Florida Statutes.

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

Name	<u>Jurisdiction</u>	Form/Entity Type
Thermtech Services, Inc.	Florida	For Profit Corporation
· · · · · · · · · · · · · · · · · · ·		
-		•
SECOND: The exact name, as follows:	form/entity type, and jurisdi	ction of the <u>surviving</u> party are
Name	<u>Jurisdiction</u>	Form/Entity Type
Mistras Group, Inc.	Delaware	For Profit Corporation

THIRD: The attached plan of merger was approved by each domestic corporation, limited liability company, partnership and/or limited partnership that is a party to the merger in accordance with the applicable provisions of Chapters 607, 605, 617, and/or 620, Florida Statutes.

**FOURTH:** The attached plan of merger was approved by each other business entity that is a party to the merger in accordance with the applicable laws of the state, country or jurisdiction under which such other business entity is formed, organized or incorporated.

FIFTH: If other than the date of filing, the effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State:

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

<u>SIXTH:</u> If the surviving party is not formed, organized or incorporated under the laws of Florida, the survivor's principal office address in its home state, country or jurisdiction is as follows:

c/o Corporation Service Company	
2711 Centerville Road, Suite 400	
Wilmington, DE 19808	

**SEVENTH:** If the surviving party is an out-of-state entity, the surviving entity:

- a.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce any obligation or the rights of dissenting shareholders of each domestic corporation that is party to the merger.
- b.) Agrees to promptly pay the dissenting shareholders of each domestic corporation that is a party to the merger the amount, if any, to which they are entitled under s. 607.1302, F.S.

### **EIGHTH:** Signature(s) for Each Party:

Certified Copy (optional):

Name of Entity/Organization:	Signature(s):/	Typed or Printed Name of Individual:
Thermtech Services, Inc.	OHNIM/1	Michael C. Keefe
Mistras Group, Inc.	MANA	Michael C. Keefe
Corporations:	· ·	man, President or Officer
General Partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships: Limited Liability Companies:	Signature of a general Signatures of all gene Signature of a general	partner or authorized person ral partners
Fees:	\$35.00	Per Party

\$8.75

### PLAN OF MERGER

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
Thermtech Services, Inc.	Florida	For Profit Corporation
		· · ·
PECOND. The event name	form/ontitutume and insiediation	
s follows:	form/entity type, and jurisdiction	on of the surviving party at
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
THIRD: The terms and concentrate merged party shall be merged	Delaware  ditions of the merger are as following the surviving party, and the surviving party.	
THIRD: The terms and concentrate merged party shall be merged	ditions of the merger are as follo	ows:
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	ditions of the merger are as follo	ows:
THIRD: The terms and concentrate merged party shall be merged	ditions of the merger are as follo	ows:

### FOURTH:

A. The manner and basis of converting the interests, shares, obligations or other securities of each merged party into the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:
Each share of merged party shall be converted into \$1.00 cash.
(Attach additional sheet if necessary)
B. The manner and basis of converting the <u>rights to acquire</u> the interests, shares, obligations or other securities of each merged party into the <u>rights to acquire</u> the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:
All rights to acquire shares, interest, obligations and other securities of the merged party shall be canceled.
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<b>FIFTH:</b> If a partnership is the survivor, the name and business address of each general partner is as follows:
<u>, , , , , , , , , , , , , , , , , , , </u>
(Attack additional shoot if we recognized)
(Attach additional sheet if necessary)
SIXTH: If a limited liability company is the survivor, the name and business address of each manager or managing member is as follows:
(Attach additional sheet if necessary)

	(Attach additional sheet if necessary)
HTH: Oth	er provision, if any, relating to the merger are as follows:
ITH: Oth	
ITH: Oth	
ITH: Oth	
HTH: Oth	
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