DIVISION OF COMPOSERIOUS



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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fak Number : (850)205-0380

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number : 072450003255

: (305) 634-3694 Phone

Fax Number : (305)633-9696

MERGER OR SHARE EXCHANGE

netcompass, Ilc

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Electronic Filing Menu

Corporate Filing Menu

Help

Name

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Porm/Entity Type

Certificate of Merger For For Plorida Limited Liability Company

The following Certificate of Merger is submitted to merge the following Florida Limited Liability Company(ios) in accordance with s. 608.4382, Florida Statutes.

FIRST: The exact name, form/entity type, and jurisdiction for each metaling party are as follows:

Jurisdiction

NetCompany 11 C		11.0
NetCompass, LLC	Florida	LLC
LO4-12628		
,		
SECOND: The exect name, for as follows:	m/entity type, and jurisdic	nion of the <u>curvivine</u> party ar
Name	Jurisdiction	Foon/Entity Type
Miami Office Systems, I	nc. Florida	Corporation
J22071		<u></u>

THIRD: The attached pian 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, 608, 617, and/or 620, Florida Statutes.

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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.
<u>FIFTH:</u> 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:
SIKTH: 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:
SEVENTH: If the survivor is not formed, organized or incorporated under the laws of Florida, the survivor agrees to pay to any members with appraisal rights the amount, to which such members are entitles under as.608.4351-608.43595, F.S.
EIGHTH: If the surviving party is an out-of-state entity not qualified to transact business in this state, the surviving entity:
a.) Lists the following street and mailing address of an office, which the Florida Department of State may use for the purposes of s. 48.181, F.S., are as follows:
Street address: 14791 Oak Lane
Mlami Lakes, FL 33016
Mailing address: 14791 Oak Lane
Miami Lakes, FL 33016
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e de de la composición dela composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición de la composición dela composición de la composición dela composición del

b.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce obligations of each limited liability company that merged into such entity, including any appraisal rights of its members under ss.608.4351-608.43595, Florida Statutes.

NINTH: Signature(s) for Each Party:

Name of Entity/Organization:

Signature(s):

Typed or Printed
Name of Individual:

NetCompass, LLC

Miami Office Systems, Inc.

Luis Gonzalez, Manager

Luis Gonzalez, President

Corporations:

Chairman, Vice Chairman, President or Officer

(If no directors selected, signature of incorporator.)

General partnerships:

Signature of a general partner or authorized person

Florida Limited Partnerships: Non-Florida Limited Partnerships: Signatures of all general partners
Signature of a general partner

Limited Liability Companies:

Signature of a member or authorized representative

Fees: For each Limited Liability Company:

\$25.00

For each Corporation:

\$35.00

Por each Limited Partnership:

\$52.50

For each General Partnership: For each Other Business Entity: \$25.00 \$25.00

Certified Copy (optional):

\$30,00

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Plan of Merger

FIRST: The exact name, form/entity follows:	type, and jurisdiction i	of each <u>merging</u> party me as
Name	<u>Invisdiction</u>	Form/Entity Type
Miami Office Systems, Inc.	Florida	Corporation
NetCompass, LLC	Florida	LLC
SECOND: The exact name, form/en	tity type, and jurisdiction	n of the <u>survivine</u> party are
Name	<u>lurisdiction</u>	Porm/Entity Type
Miami Office Systems, Inc.	Florida	Corporation
TIURD: The terms and conditions of At the date of merger, Mian		
100% of the interest in NetC	Compass, LLC. N	letCompass, as a whol
owned subsidiary of MOS is	merging into MC	S and, all me mbership
interests in NetCompass, L	LC will be cancell	ed upon the effective
date. Pursuant to Fla. Stat.	Section 608.438	3, when the merger
becomes effective, MOS, as	the surviving en	lity, will own all assets
of NetCompass, subject to a	all of its liabilities.	
(Anoch add	itional sheat if necessor	vl

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FOURTH: A. The manner and basis of converting the interests, wheres, obligations or other	
securities of each merged party into the interests, shores, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:	
	•
(Attack additional sheet if necessary)	
B. The manner and basis of conventing rights to acquire the interests, shares, obligations or other securities of each merged party into rights to acquire the interests, shares,	
obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:	
property to an about a.	
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	(Attach additional sheet if necessary)	,	·• ·
TH: Other o	covisions, if any, relating to the merger are as follows:		•
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		LAHASSEE, F	APR 20 AM 9
		LAHASSEE, FLORIDA	APR 20 AM

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