45046000601

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Na	me)		
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to	Filing Officer:			
L				

Office Use Only



000288630330

08/08/16--01038--022 **50.00

201 NU6 -8 P 3 2

AUG 18 2016

Marcel



45 Ottawa Avenue SW Suite 1100 P.O. Box 306 Grand Rapids, MI 49501-0306

MERITAS LAW FIRMS WORLDWIDE

CHERYL A. STRICKLEN

· Paralegal

616.831.1811 616.988.1811 fax stricklenc@millerjohnson.com

August 5, 2016

Florida Department of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Colon

Colonial Funding Group, L.L.C.

Dear Sir/Madam:

Enclosed is our check in the amount of \$50 to file Articles of Merger for Florida Limited Liability Company for Colonial Funding Group, L.L.C.

Please return a filed copy of the Articles to me in the enclosed, self-addressed envelope. Thank you.

If you have any questions, please don't hesitate to contact me.

Sincerely,

MILLER JOHNSON

Ву

Cheryl A. Stricklen Paralegal

CheylA. Strickler

CAS Enclosures

cc:

Michael J. Taylor

COVER LETTER

TO:	Amendment Section Division of Corporations						
SURI	TECT: Colonial Funding Group, L.L.C.						
	Name of Surviving Party						
The e	nclosed Certificate of Merger and fee(s)	are submit	ted for filing.				
Please	e return all correspondence concerning t	his matter t	o:				
Maxw	vell N. Barnes						
	Contact Person	·					
Miller	r Johnson						
	Firm/Company						
P.O. E	30x 306						
	Address						
Grand	l Rapids, MI 49501-0306						
	City, State and Zip Co	ode					
barne	sm@millerjohnson.com						
	E-mail address: (to be used for future	annual repo	ort notification)	_			
For fu	urther information concerning this matte	er, please ca	11:				
Maxw	vell N. Barnes	at (831-17	725			
	Name of Contact Person		Area Code	Daytime Telephone Number			
	Certified copy (optional) \$30.00						
Amen Divisi Clifto	EET ADDRESS: adment Section ion of Corporations Building Executive Center Circle		MAILING AD Amendment Se Division of Cor P. O. Box 6327 Tallahassee, FL	ection rporations			
	nassee, FL 32301		•				

CR2E080 (2/14)

Articles of Merger For Florida Limited Liability Company

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 605.1025, Florida Statutes.

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

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type		
Robert Wood Enterprises, L.L.C.	Michigan	limited liability company		
Colonial Funding Group, L.L.C.	Florida	limited liability company		
1/8/1/ L				
SECOND: The exact name, form/entity type,	and jurisdiction of the surviving pa	rty are as follows:		
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type		
Colonial Funding Group, L.L.C.	Florida	limited liability company		

THIRD: The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

FOUR'	TH: Please check one of the b	oxes that ap	ply to surviving en	tity: (if applicable)				
Z.	This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record are attached.							
□	This entity is created by the merger and is a domestic filing entity, the public organic record is attached.							
3	This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.							
o	This entity is a foreign entity to mailing address to which the of Florida Statutes is:							
ss.605. SIXTE	1: This entity agrees to pay any 1006 and 605.1061-605.1072, in the date of filing the the date this document is file.	F.S. ig, the delaye	ed effective date of	the merger, which c				
as the	If the date inserted in this block document's effective date on the	e Departmen			ements, this date w	rill not be listed		
SEVE	NTH: Signature(s) for Each Pa	arty:			Typed or Printed	i		
Name (of Entity/Organization:		Signature(s):	1	Name of Individua			
Robert	Wood Enterprises, L.L.C.		Susaw W.	ood nurtalli	Susan Wood-Me	erlotti		
Colonia	al Funding Group, L.L.C.		Sua an W	ood nurlatti ood merlatti	Susan Wood-Me	rlotti		
				.,				
•	rations:	(If no dire	ectors selected, sign	President or Officer mature of incorporate				
	ıl partnerships:	_	• .	r or authorized pers	on			
	orida Limited Partnerships: Signatures of all general partners							
	orida Limited Partnerships: d Liability Companies:		of a general partner of an authorized p					
	c zicomij companiosi	2.600000	т — п-шогиот р					
Fees:	For each Limited Liability Co	трапу:	\$25.00	For each Corpor		\$35.00		
· - -	For each Limited Partnership:		\$52.50	For each Genera		\$25.00		
	For each Other Business Entit		\$25.00	Certified Copy	(optional):	\$30.00		