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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

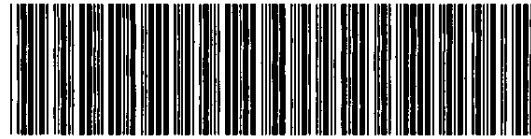
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 SEP 21 PM 3:28

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W12-40821

J. BRYAN

SEP 25 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 3, 2012

JAMES MONTGOMERY  
FREE REIN ENTERPRISES LLC  
5124-3 AVE. W  
PALMETTO, FL 34221

SUBJECT: FREE REIN ENTERPRISES LLC  
Ref. Number: W12000040821

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2012 SEP 21 PM 3:28  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for FREE REIN ENTERPRISES LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because Chapters 607, 608, and 620, Florida Statutes, require the certificate of conversion and the documentation forming the resulting Florida business entity be filed simultaneously, the enclosed certificate of conversion cannot be filed. Our records reflect the documentation forming the resulting Florida business entity was previously filed with this office. Therefore, we are enclosing the form and instructions for filing a merger.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan  
Regulatory Specialist II

Letter Number: 412A00020277

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Free Rein Enterprises LLC  
Name of Surviving Party

The enclosed Certificate of Merger and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

James Montgomery  
Contact Person

Free Rein Enterprises LLC  
Firm/Company

5124-3Av. W.  
Address

Palmetto, FL 34221  
City, State and Zip Code

JKMonty1@Aol.com  
E-mail address: (to be used for future annual report notification)

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REGISTRATION SECTION  
TALLAHASSEE, FL 32314

For further information concerning this matter, please call:

James Montgomery at ( 941 ) 705-0221  
Name of Contact Person Area Code and Daytime Telephone Number

Certified copy (optional) \$30.00

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

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2009 SEP 21 PM 3:28  
TALLAHASSEE COUNTY FLORIDA  
CLERK OF CIRCUIT COURT

**Certificate of Merger  
For  
Florida Limited Liability Company**

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

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

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
<u>Free Rein Enterprises LLC</u>	<u>Nevada</u>	<u>LLC</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**SECOND:** The exact name, form/entity type, and jurisdiction of the **surviving** party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
<u>Free Rein Enterprises LLC</u>	<u>Florida</u>	<u>LLC</u>

**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, 608, 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:

**SIXTH:** 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:

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**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 entitled under ss.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: \_\_\_\_\_

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Mailing address: \_\_\_\_\_

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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:
<i>Nevada Free Rain Enterprises LLC</i>	<i>James Montgomery</i>	<i>James Montgomery</i>
<i>F) Free Rain Enterprises LLC</i>	<i>James Montgomery</i>	<i>James Montgomery</i>

Corporations:	Chairman, Vice Chairman, President or Officer <i>(If no directors selected, signature of incorporator.)</i>
General partnerships:	Signature of a general partner or authorized person
Florida Limited Partnerships:	Signatures of all general partners
Non-Florida Limited Partnerships:	Signature of a general partner
Limited Liability Companies:	Signature of a member or authorized representative

**Fees:**

For each Limited Liability Company:	\$25.00	<i>x 2</i>	<i>50.</i>
For each Corporation:	\$35.00		
For each Limited Partnership:	\$52.50		
For each General Partnership:	\$25.00		
For each Other Business Entity:	\$25.00		

**Certified Copy (optional):** \$30.00

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2019 SEP 21 PM 3:28  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

PLAN OF MERGER

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

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
Free Rein Enterprises LLC	Nevada	LLC

**SECOND:** The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
Free Rein Enterprises LLC	Florida	LLC

**THIRD:** The terms and conditions of the merger are as follows:

The Nevada LLC will merge into Florida LLC, and the Florida LLC will be the surviving LLC. All rights of the Nevada LLC will become part of the Florida LLC

(Attach additional sheet if necessary)

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CLERK OF DISTRICT COURT  
JULIA A. BROWN, CLERK  
STATE OF NEVADA

**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:

Fl. LLC accepts any all obligations of Nevada  
LLC.

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*(Attach additional sheet if necessary)*

B. The manner and basis of converting 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:

Fl. LLC receives all rights of Nevada LLC.

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*(Attach additional sheet if necessary)*



**FIFTH:** Any statements that are required by the laws under which each other business entity is formed, organized, or incorporated are as follows:

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*(Attach additional sheet if necessary)*

**SIXTH:** Other provisions, if any, relating to the merger are as follows:

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*(Attach additional sheet if necessary)*

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2022 SEP 21 PM 3:28  
TALLAHASSEE FLORIDA