12/000/16/34

(Re	equestor's Name)	
. (Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	· , ·
Certified Copies	_ Certificates	of Status
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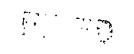
R. WHITE JAN 1 6 2020

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Microb, LLC	
	ne of Surviving Party
The enclosed Certificate of Merger and fee(s) are subn	nitted for filing.
Please return all correspondence concerning this matte	r to:
Richard Langan	
Contact Person	
Richard Langan, Esq.	
Firm/Company	· ······
325-2 Boston Post Road	
Address	
Sudbury, MA 01776	
City, State and Zip Code	
RLangan@richardlanganesq.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, please	call:
Richard Langan 97	78 443-4000
Name of Contact Person	Area Code Daytime Telephone Number
Certified copy (optional) \$30.00	
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 32301	Tallahassee, FL 32314

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:

Name	<u>Jurisdiction</u>	Form/Entity Type
Barnett Drive, LLC	FL	LLC
Microb Limited Partnership	FL	Limited Partnership
		<u></u>
SECOND: The exact name, form/entity type, a	and jurisdiction of the surviving part	y are as follows:
Name	<u>Jurisdiction</u>	Form/Entity Type
Microb, LLC	New Hampshire	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).

<u>FOU</u>	RTH: Please check one of the	boxes that apply to surviving e	ntity: (if applicable)			
a	This entity exists before the rare attached.	This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic reco are attached.				
0	This entity is created by the r	merger and is a domestic filing	entity, the public organic record is attac	ched.		
0	This entity is created by the liability partnership, its states	merger and is a domestic limited ment of qualification is attached	d liability limited partnership or a dome	estic limited		
2	This entity is a foreign entity that does not have a certificate of authority to transact business in this state. The mailing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 48, Florida Statutes is:					
	16 Wabanaki Way, Andover, M	4A 01810				
				_		
				-		
		<u> </u>		<u>. </u>		
FIFT	EE COLL					
FIF 1	H : This entity agrees to pay any 5.1006 and 605.1061-605.1072,	y members with appraisal rights	the amount, to which members are en	titled under		
55,000	5.1000 and 603.1061-603.1072,	F.S.				
SIXT	H: If other than the date of file	no the delayed effective date of	the merger, which cannot be prior to i			
days a	after the date this document is fi	iled by the Florida Department	- co	nor more than 9		
•			of State.			
Decer	mbor 21, 2010	bepartment	or state:			
Decen	nber 31, 2019		or State:			
						
Note:	If the date inserted in this bloc	ck does not meet the applicable	statutory filing requirements, this date	will not be liste		
Note:	If the date inserted in this bloc		statutory filing requirements, this date	will not be lister		
Note:	If the date inserted in this bloc document's effective date on the	ck does not meet the applicable he Department of State's record	statutory filing requirements, this date	will not be liste		
Note:	If the date inserted in this bloc	ck does not meet the applicable he Department of State's record	statutory filing requirements, this date s.			
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Note: as the SEVF Name	If the date inserted in this bloc document's effective date on the ENTH: Signature(s) for Each Pof Entity/Organization:	ck does not meet the applicable he Department of State's record Party:	Typed or Print Name of Individu	ed Jal: Jre, AMBR		
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