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(Document Number)						
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Special Instructions to Filing Officer.						





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Words

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COVER LETTER

TO:	Amendment Section Division of Corporations
SHRI	ECT: NO HOTEL INVESTORS, LLC
5050	Name of Surviving Party
The er	nelosed Certificate of Merger and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to:
Dav	vid M. Edelblum, Esq.
	Contact Person
Feir	ngold & Edelblum LLC
	Firm/Company
2 U	niversity Plaza Suite 307
	Address
Had	ckensack, NJ 07601
	City, State and Zip Code
dec	lelblum@fetaxlaw.com
_	E-mail address: (to be used for future annual report notification)
ded	

For further information concerning this matter, please call:

David M. Edelblum Esq.

, 201

880-6640

Name of Contact Person

Area Code

Daytime Telephone Number

☐ Certified copy (optional) \$30.00

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

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CR2E080 (2/20)

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.

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>FOUR</u>	TH: Please check one of the b	oxes that a	oply to surviving en	tity: (if applicable)				
	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.							
	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.							
This entity is a foreign entity that does not have a certificate of authority to transact business in this statemailing address to which the department may send any process served pursuant to s. 605.0117 and Charliorida Statutes is: NO HOTEL INVESTORS, LLC								
	16 Penny Lane							
	Hampton Bay, NY	11946	· · · · · · · · · · · · · · · · · · ·					
Note: as the SEVE	If the date inserted in this block document's effective date on the NTH: Signature(s) for Each Pa of Entity/Organization:	does not me Department	ncet the applicable s	tatutory filing requireme	Typed or P Name of In	Printed ndividual:		
NO HOTEL INVESTORS, LLC					Pnina a/k/a	"Nini" Ofri		
<u>NO</u>	HOTEL INVESTORS	S, LLC			Pnina a/k/a	"Nini" Ofri		
Genera Florida Non-F	rations: al partnerships: a Limited Partnerships: lorida Limited Partnerships: d Liability Companies:	(If no dir Signatur Signatur Signatur	~	nature of incorporator.) or or authorized person oners or				
Fees:	For each Limited Liability Cor For each Limited Partnership: For each Other Business Entity		\$25.00 \$52.50 \$25.00	For each Corporation For each General Pace Certified Copy (op.	rtnership:	\$35.00 \$25.00 \$30.00		