# 108000114133

·
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basiness Emily Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,

Office Use Only



700158675297

07/31/09--01017--019 \*\*60.00

PAIL ED

OP JUL 31 PH 3: 4:

SECRETARY OF STATE
TALL AHASSEF FLOOR

D. BRUCE

AUG 0 3 2009

**EXAMINER** 

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
·	an Leasing, LLC
Name of Surv	
The enclosed Certificate of Merger and fee(s)	are submitted for filing.
Please return all correspondence concerning the	his matter to:
Doug Marek, Esq.	
Contact Person	
Doug Marek, P.A.	
Firm/Company	
101Pineapple Grove Way, Suite	200
Address	
Delray Beach, Florida 33444	<u> </u>
City, State and Zip Code	
dmarek@dmareklaw.co	SECH ALLA
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter	
	ıt ( <u>561</u> ) 454-161
Name of Contact Person	Area Code and Daytime Telephone Northber
Certified copy (optional) \$30.00	
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassae El 32301	Tananaooo, I D DEDI I

## 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:

Name	Jurisdiction	Form/Entity Type
Puza Leasing, Inc.	New Jersey	corporation 7 09
		JUL 31 F
SECOND: The exact name, form/er as follows:	ntity type, and jurisdiction of	the surviving party are
Name	<u>Jurisdiction</u>	Form/Entity Type
Ocean Leasing, LLC	Florida	limited liability company
		U8000/14/33

**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.

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 Florida, the survivor's principal office address in its home state, country or jurisdic as follows:			
<b>SEVENTH:</b> If the survivor is not formed, organized or incorporated under the law Florida, the survivor agrees to pay to any members with appraisal rights the amoun which such members are entitles under ss.608.4351-608.43595, F.S.			
<b>EIGHTH:</b> 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:	SECF	L 60	
Street address:	HASSEE.	UL 31 PM	
	F STATE FLORIDA	H 3: 49	Ö
Mailing address:			

**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.

**<u>FIFTH:</u>** If other than the date of filing, the effective date of the merger, which cannot be

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.

y:
Typed or Printed Name of Individual:
Anthony V. Pugliese, III,
Manager
Anthony V. Pugliese, III,
President
Chairman, Vice Chairman, President or Officer
(If no directors selected, signature of incorporator.) Signature of a general partner or authorized person Signatures of all general partners
Signature of a general partner Signature of a member or authorized representative
ompany: \$25.00
\$35.00
\$52.50

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	

### PLAN OF MERGER

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
Puza Leasing, Inc.	New Jersey	corporation
. SECOND: The exact name, f as follows:	orm/entity type, and jurisdictio	n of the <u>surviving</u> party are
Name	<u>Jurisdiction</u>	Form/Entity Type
Ocean Leasing, LLC	Florida	limited liability compan
		SECR
		HASSEE
		PN 3: 49 - FLORIDA

# 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:	
one share of merging company shall be exchanged for one share of surviving	
company	
(Attach additional sheet if necessary)	
B. The manner and basis of converting <u>rights to acquire</u> the interests, shares, obligations or other securities of each merged party into <u>rights to acquire</u> the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:	
n/a	
•	
Aω	
ECRE AA	
ASS	=
E C T	m
	j
DA DA	
(Attach additional sheet if vecessary)	

<del></del>	· · · · · · · · · · · · · · · · · · ·						
· · · · · · · · · · · · · · · · · · ·							
	(Attac	h additiona	l sheet if ne	cessary)			
I: Other pro	visions, if an	y, relating to	o the merge	r are as fo	llows:		
1: Other pro	visions, if an	y, relating to	o the merge	r are as fo	llows:		
1: Other pro	visions, if an	y, relating to	o the merge	r are as fo	llows:		
		,					
	visions, if an	,					
		,					3.0° (2)
		,					, y <sup>*</sup> 2
		,					
		,				TALL.	
		,				TALLAHA	2562
		,				TALLAHASSE	31 31