

L09000003083

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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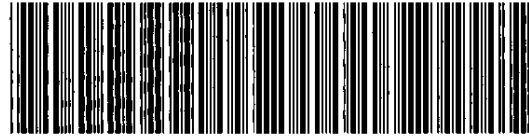
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SEP 16 2010

EXAMINER

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09/14/10--01026--009 **75.00

FILED
2010 SEP 15 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ole Ivy Equity Partners 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:

Michael E. Harbison

Contact Person

Ole Ivy Equity Partners LLC

Firm/Company

P.O. Box 3152

Address

Winter Park, FL 32790-3152

City, State and Zip Code

meh@oleivy.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael E. Harbison

Name of Contact Person

at (407) 374-3040

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

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

FILED
2010 SEP 15 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>
Ole Ivy Healthcare LLC	Florida	LLC L09-45734
Ole Ivy Media LLC	Florida	LLC L09-9616

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>
Ole Ivy Equity Partners LLC	Florida	LLC

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:

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:

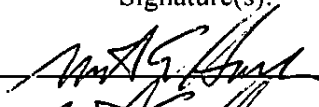
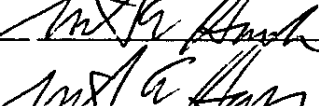
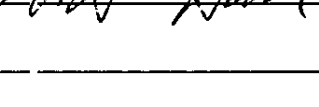
a.) Lists the following street and mailing address of an office, which the Florida Department of State may use for the purposes of s. 48.181, F.S., are as follows:

Street address: _____

Mailing address: _____

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:
Ole Ivy Equity Partners LLC		Michael E. Harbison
Ole Ivy Healthcare LLC		Michael E. Harbison
Ole Ivy Media LLC		Michael E. Harbison

Corporations:	Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporator.)
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
 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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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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2010 SEP 15 PM 2:52

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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>
Ole Ivy Healthcare LLC	Florida	LLC
Ole Ivy Media LLC	Florida	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>
Ole Ivy Equity Partners LLC	Florida	LLC

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

Ole Ivy Equity Partners LLC is the sole member and manager of both Ole Ivy Healthcare LLC and Ole Ivy Media LLC. Michael E. Harbison is the sole member and manager of Ole Ivy Equity Partners LLC. As of the effective date of this merger, all assets, liabilities and operations of Ole Ivy Healthcare LLC and Ole Ivy Media LLC will be owned, assumed and absorbed by and into Ole Ivy Equity Partners LLC.

(Attach additional sheet if necessary)

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:

Ole Ivy Equity Partners LLC is the sole member and manager of both Ole Ivy
Healthcare LLC and Ole Ivy Media LLC. Michael E. Harbison is the sole member
and manager of Ole Ivy Equity Partners LLC and, as such, will retain sole
beneficiary ownership and control of all parties to this merger.

(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:

Not applicable

(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:

Not applicable

(Attach additional sheet if necessary)

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

Not applicable

(Attach additional sheet if necessary)