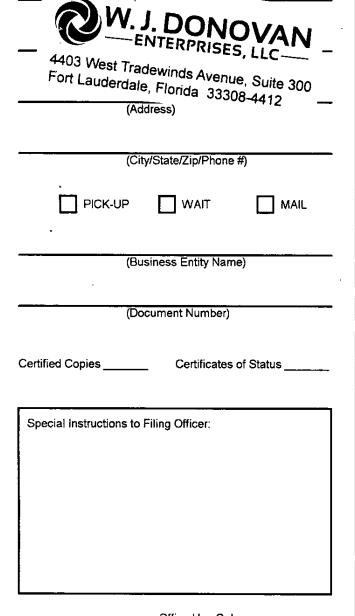
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Office Use Only



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January 20, 2016

W.J. Donovan Enterprises, LLC 4403 West Tradewinds Ave Suite 300 Ft. Lauderdale, FL 33308-4412

SUBJECT: W. J. DONOVAN ENTERPRISES, LLC

Ref. Number: L09000095877

We have received your document for W. J. DONOVAN ENTERPRISES, LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a merger, pursuant to s.605.0212(8), Florida Statutes, each party to the merger must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the articles of merger are submitted for filing.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 716A00001217

COVER LETTER

Division of Corporations	,
SUBJECT: W. J. Donova Name of S	W Enterprises 1
Please return all correspondence concerning	g this matter to:
William J. Donova Contact Person	en
W.J. Donovan Enter Firm/Company	prises 110
4403 W. Tradew	inds Ave. #300
Ft. Laudersale t	FI 33308
City, State and Zip Code DADVIOVA (Constitution of Constitution of City, State and Zip Code E-mail address: (to be used for future annual recommendation)	donovan. Com
For further information concerning this ma	tter, please call:
Bill Donova N Name of Contact Person	at (954) 532-7255 Area Code and Daytime Telephone Number
☐ Certified Copy (optional) \$8.75	
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 32314

Tallahassee, FL 32301

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Articles of Merger For Florida Profit or Non-Profit Corporation Into Other Business Entity

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Form/Entity Type

The following Articles of Merger are submitted to merge the following Florida Profit and/or Non-Profit Corporation(s) in accordance with s. 607.1109, 617.0302 or 605.1025, Florida Statutes.

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

Jurisdiction

Name

Stirling &	Brook tar	ms, Inc. No	w York	S" Cor	porat. —
as follows:		entity type, and jurisdic			
Name W.J. Dora	ovan En	Jurisdiction Leppi 5e5 L	Form C Flor	Entity Typ	<u>e</u> //C

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, 605, 617, and/or 620, Florida Statutes.

SEVENTH: If the surviving party is an out-of-state entity, the surviving entity:

- a.) Appoints the Florida Sccretary of State as its agent for service of process in a proceeding to enforce any obligation or the rights of dissenting shareholders of each domestic corporation that is party to the merger.
- b.) Agrees to promptly pay the dissenting shareholders of each domestic corporation that is a party to the merger the amount, if any, to which they are entitled under s. 607.1302, F.S.

EIGHTH: Signature(s) for Each Party:

Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
W.J. Doman Enterpr	igg 11(1	
Stirling Brook fan	W.J. Cons	wax William J. Donou
OFITTING DIODE, FAM	MA DA	nover William J. Donor

Corporations:

Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporator.) Signature of a general partner or authorized person

General Partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships:

Signatures of all general partners Signature of a general partner

Limited Liability Companies:

Signature of a member or authorized representative

Fees:

\$35.00 Per Party

Certified Copy (optional):

\$8.75

PLAN OF MERGER

	The exact name, form/ent	ity type, and jurisdi	iction for eac	h <u>merging</u> party	are as
follows: Name		Jurisdiction		Form/Entity Typ	e.
	ng Brook Farmy		but	S Corpo	rati.
SECON	D. The exect name form/	ontity type, and jur	isdiction of t	ha s urv iv ing part	y are
as follow	D: The exact name, form/	entity type, and jur	isaiction of t	ne surviving part	y arc
Name		<u>Jurisdicti</u>	<u>on</u>	Form/Entity Typ	<u>e</u>
1. J. Do	onovan Enterpris	EGUC FI	orida	110	
	The terms and conditions	s of the merger are	as follows:		•
Allo	f the asses	to and	liabil	ities or	<u>P</u> _
Stirl	ing Brook fo	arms, Inc	y will	be merg	ed
into	ing Brook to W. T. Dog	novan En	terpr	ises, L	C.
					
			-		
		<u></u>			
					
	(4111	additional about if	, and a a a a a a a a a a a a a a a a a a	±	
	(Attach a	additional sheet if n	ecessary)		

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:
As William J. Donovan is the sole sharefulder
in the merging party, Stirling Brook farms,
Inc. and is also the sole Member of
the surviving party W.T. Donovan Enterprise
and merger of all assets and liabilitie
in the second se
(Attach additional sheet if necessary)
B. The manner and basis of converting the <u>rights to acquire</u> the interests, shares, obligations or other securities of each merged party into the <u>rights to acquire</u> the interests, shares, obligations or others securities of the survivor, in whole or in part, into each or other property is as follows:
This is not applicable.
<u> </u>
(Attach additional sheet if necessary)

	ip is the survivor, the name and business address of each general
partner is as follows:	
N/A	
	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	
	(Attach additional sheet if necessary)
	ability company is the survivor, the name and business address of ging member is as follows:
•	
William J. I	10110VCM
4403 111est	Tradewinds Ave. #300 lev tale, FI 33308
T cl. 1	1 1 /2
TOVE Lauc	(ev tall, +1 3000
	,
<u> </u>	(Attach additional sheet if necessary)
	(Anden additional sheet if necessary)

	statements that are required by the laws under which each other ormed, organized, or incorporated are as follows:
1/11	, <u>.</u>
TY/A	
·	
	(Attach additional sheet if necessary)
IGHTH: Other p	provision, if any, relating to the merger are as follows:
NA	
	(Attach additional sheet if necessary)