

U10000119292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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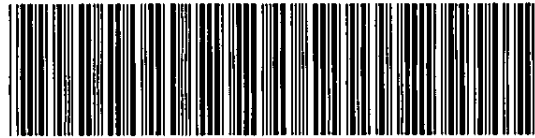
(Business Entity Name)

(Document Number)

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merger

APR 07 2014

R. WHITE

RECEIVED  
DEPARTMENT OF STATE  
14 APR -4 PM 1:19  
TALLAHASSEE, FLORIDA  
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APR -4 PM 9:43

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**DATE: 4/4/2014**

**NAME: BLACK TREE DESIGN INCEPTIONS LLC**

**TYPE OF FILING: ARTICLES OF MERGER**

**COST: \$80**

**RETURN: CERTIFIED COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

*PDH*

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**File First**

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Black Tree Design Inceptions LLC

Name of Surviving Party

The enclosed Certificate of Merger and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Thomas F. Quinn, Esq.

Contact Person

Odin, Feldman & Pittleman, P.C.

Firm/Company

1775 Wiehle Avenue, Suite 400

Address

Reston, Virginia 20190

City, State and Zip Code

troy.hopcroft@blacktreeinc.net

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

For further information concerning this matter, please call:

Thomas F. Quinn

at ( 703 ) 218-2165

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

FILED

Articles of Merger  
For  
Florida Limited Liability Company

14 APR -4 AM 9:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
Black Tree Design	Florida	LLC
Inceptions LLC		
Black Tree, LLC	Virginia	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>
Black Tree Design Inceptions LLC	Florida	LLC

**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).

**FOURTH:** Please check one of the boxes that apply to surviving entity: (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 state. The mailing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 48, Florida Statutes is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FIFTH:** This entity agrees to pay any members with appraisal rights the amount, to which members are entitled under ss.605.1006 and 605.1061-605.1072, F.S.

**SIXTH:** If other than the date of filing, the delayed 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:

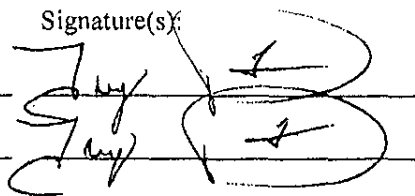
**SEVENTH:** Signature(s) for Each Party:

Name of Entity/Organization:

Black Tree Design Inceptions LLC

Black Tree, LLC

Signature(s):



Typed or Printed  
Name of Individual:

Troy Hopcroft, Manager

Troy Hopcroft, Manager

Corporations:

General partnerships:

Florida Limited Partnerships:

Non-Florida Limited Partnerships:

Limited Liability Companies:

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 an authorized person

**Fees:** For each Limited Liability Company:

For each Limited Partnership:

For each Other Business Entity:

\$25.00

\$52.50

\$25.00

For each Corporation:

For each General Partnership:

**Certified Copy (optional):**

\$35.00

\$25.00

\$30.00