Carina L. Dotson

2162742569

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : HAHN LOESER + PARKS LLP

Account Number : I20050000053 Phone : (216)621-0150 Fax Number : (216)241-2824

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Cdotson & hahnlaw.com

RECEIVED.

MERGER OR SHARE EXCHANGE Compass Group Partners, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | or 04 |
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Compass Group Partners, LLC

Name of Surviving Parts

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

Please return all correspondence concerning this matter to:

Carina L. Dotson

Contact Person

Hahn Loeser & Parks LLP

Firm/Company

200 Public Square, Suite 2800

Address

Cleveland, Ohio 44114

City, State and Zip Code

cdotson@hahnlaw.com

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

For further information concerning this matter, please call:

Carina Dotson

.,216

274-2349

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

CR2E080 (12/13)

Name

Form/Entity Type

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Certificate of Merger For 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. 605.1025, Florida Statutes.

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

Jurisdiction

| Compass Group Partners, LLC | Florida | Limited Liebility Co. | |
|---------------------------------|----------------------------|--|-----|
| The Compass Group, Inc. | Indiana | Corporation | |
| | | | |
| SECOND: The exact name, form/er | ntity type, and jurisdicti | on of the <u>surviving</u> party are as follow | vs: |
| Name | Jurisdiction | Form/Entity Type | |
| Compass Group Partners, LLC | Florida | Limited Liability Co. | |

THIRD: The 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.

SECRETARY OF STATE OT STATE OF STATE OF CORPORATION OF CORPORATION 11:47

Carina L. Dotson

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| FOURTH: | Please check one of the boxes that apply to surviving entity: |
|---------|---|
| | |

| X | 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 ilmited 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 Plorida Department of State:

\$25.00

\$30.00

| <u>SEVENTH:</u> Signature(s) for Each Name of Entity/Organization: | Party: Signature(s): | Typed or Printed Name of Individual: | |
|--|--|---|--|
| Compass Group Partners, LLC | // ^/ | Fren Gary R. Dittman | |
| The Compass Group, Inc. | Con Ra | Honay Gary R. Dittman | |
| | 0 (/ | | |
| Corporations: | • | rman, President or Officer ted, signature of incorporator. | |
| General partnerships: | Signature of a general partner or authorized person | | |
| Florida Limited Partnerships: | | | |
| Non-Florida Limited Partnerships: | Signature of a general partner | | |
| Limited Liability Companies: | ability Companies: Signature of an authorized person | | |
| Fees: For each Limited Liability C | Company: \$25.00 | 0 | |
| For each Corporation: | \$35.00 | 0 | |
| | ፈ. ኖሮን ረ. | Λ. | |
| For each Limited Partnershi | p: \$52.50 | U | |

For each Other Business Entity:

Certified Copy (optional):