

L12000020893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

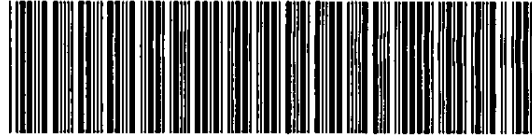
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
15 DEC 16 PM 12:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 28 2015
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 18, 2015

Amanda Levine, Esq.-Moffa, Gainor & Sutton, P.A.
One Financial Plaza, Suite 2202
100 S.E. Third Ave
Ft. Lauderdale, FL 33394

SUBJECT: BRIDGES EVERGLADES, LLC
Ref. Number: L12000020893

We have received your document for BRIDGES EVERGLADES, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is incomplete. The first page of the merger is missing. I have included a blank first page for you to fill out and return to us when you resubmit the entire document.

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: 915A00026560

LAW OFFICES OF
MOFFA, GAINOR, & SUTTON, P.A.

ONE FINANCIAL PLAZA, SUITE 2202
100 S.E. THIRD AVENUE
FT. LAUDERDALE, FL 33394
OFFICE 954-761-3700 – FAX 954-761-1004
WWW.FLORIDASALESTAX.COM

SHAREHOLDERS

JOSEPH C. MOFFA, CPA, ESQUIRE
THOMAS R. GAINOR, CPA, ESQUIRE
JAMES H. SUTTON, JR., CPA, ESQUIRE

OFFICES

FT. LAUDERDALE, FL
TAMPA, FL

December 11, 2015

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Bridges Everglades, LLC - Articles of Merger
Document Number A12000020893

To Whom It May Concern:

Please find attached the Articles of Merger to merge Bridges everglades, LLC and Bridges Enterprises, Inc. Additionally, please find a check in the amount of \$60.00, to cover the filing fee for \$25 and \$35. This is intended to cover the filing fee.

If you have any further questions, please do not hesitate to contact Amanda Levine, at 954-642-1088, or AmandaLevine@FloridaSalesTax.com.

Sincerely,



Amanda Levine, Esq.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRIDGES EVERGLADES, 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:

Amanda Levine

Contact Person

Moffa, Gainor and Sutton, P.A.

Firm/Company

100 S.E. Third Ave. Suite 2202

Address

Fort Lauderdale, FL 33394

City, State and Zip Code

AmandaLevine@FloridaSalesTax.com

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

For further information concerning this matter, please call:

Amanda Levine

at (954) 642-1088

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 (2/14)

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

FILED
15 DEC 16 PM 12:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company 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>
BRIDGES ENTERPRISES, INC	FLORIDA	CORPORATION
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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>
BRIDGES EVERGLADES, 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)

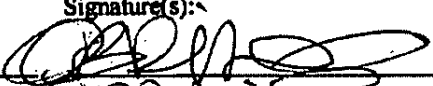

- ☒ This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record are attached.
- ☐ This entity is created by the merger and is a domestic filing entity, the public organic record is attached.
- ☐ This entity is created by the merger and is a 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:

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

SEVENTH: Signature(s) for Each Party:

Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
BRIDGES EVERGLADES, LLC		CLINT BRIDGES
BRIDGES ENTERPRISES, INC.		CLINT BRIDGES

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 an authorized person

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