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me of Surviving Party
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er to:
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call:
357-0500
Area Code Daytime Telephone Number
MAILING ADDRESS:
Amendment Section
Division of Corporations
P. O. Box 6327 Tallahassee, FL 32314

CR2E080 (2/14)

Tallahassee, FL 32301

Articles of Merger For Florida Limited Liability Company

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15 JUL - 1 AH 11:56

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:

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<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
Strategic Outfitters, LLC	Florida	LLC
TransCoastal Outfitters, LLC	Florida	LLC
SECOND: The exact name, form/entity type, a	nd jurisdiction of the <u>surviving</u> part	y are as follows:
Name	<u>Jurisdiction</u>	Form/Entity Type
Strategic Outfitters, 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).

FOUR	TH: Please check one of the l	boxes that app	ly to surviving er	ntity: (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.							
5	This entity is created by the merger and is a domestic filing entity, the public organic record is attached.							
3	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.							
5	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:							
		,						
SIXTE lays at	ter the date this document is fil	eg, the delayed ed by the Flor c does not mee	t the applicable s	statutory filing requirements, this date				
SEV <u>E</u> l	NTH: Signature(s) for Each Pa	arty:						
Name (of Entity/Organization:	5	Signat ure (s):	Typed or Print Name of Individu				
Strategi	ic Outfitters, LLC			Douglas Rehm	an, Sr			
ΓransC	oastal Outfitters, LLC		1	Douglas Rehm	an, Sr			
······		-						
Genera Florida Non-Fl	ations: l partnerships: Limited Partnerships: orida Limited Partnerships: d Liability Companies:	(If no direct Signature of Signatures Signature of Signat	tors selected, sig	er				
ees:	For each Limited Liability Co For each Limited Partnership: For each Other Business Entit		\$25.00 \$52.50 \$25.00	For each Corporation: For each General Partnership: Certified Copy (optional):	\$35.00 \$25.00 \$30.00			