## L1400015443

| (Re                                     | equestor's Name)         |      |  |  |
|---|--------------------------|------|--|--|
| (Ad                                     | dress)                   |      |  |  |
| (Ad                                     | ldress)                  |      |  |  |
| (Cil                                    | ty/State/Zip/Phon        | e #) |  |  |
| PICK-UP                                 |                          | MAIL |  |  |
|   | isiness Entity Nar       | me)  |  |  |
| (Document Number)                       |                          |      |  |  |
| Certified Copies                        | _ Certificates of Status |      |  |  |
| Special Instructions to Filing Officer: |                          |      |  |  |
|   | •                        |      |  |  |
| JUL 2 4 2014                            |                          |      |  |  |
| A. LUNT                                 |                          |      |  |  |
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Office Use Only

## **COVER LETTER**

TO: Registration Section Division of Corporations

## SUBJECT: Covida Holdings, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Interest Exchange and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shanna Morris

Name of Person

Covida Holdings, LLC

Firm/Company

10251 W. Oakland Park Blvd.

Address

Sunrise, FL 33351

City/State and Zip Code

## smorris@covida.com

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

For further information concerning this matter, please call:

| Shanna Morris                | at ( | 954        | 414-8810                 |
|------------------------------|------|------------|--------------------------|
| Name of Person               | at ( | Area Code  | Daytime Telephone Number |
| STREET/COURIER ADDRESS:      |      | MAILIN     | G ADDRESS:               |
| Registration Section         |      | Registrati | ion Section              |
| Division of Corporations     |      | Division   | of Corporations          |
| Clifton Building             |      | P.O. Box   | 6327                     |
| 2661 Executive Center Circle |      | Tallahass  | ee, Florida 32314        |
| Tallahassee, Florida 32301   |      |            |                          |

<u>Important Notice</u>: If the interest exchange involves a limited liability company, as a condition of the interest change pursuant to s. 605.0212 (11), F.S. each party to the merger must be active and current through December 31 of the calendar year the interest exchange being submitted to the Department of State for filing.

CR2E134 (2/14)

15/ 641-21 H12-113

| ARTICLES OF INTEREST EXCHANGE  |          |  |  |  |  |
|--|----------|--|--|--|--|
| Pursuant to section 605.1035, Florida Statutes, I hereby submit the following Articles of Interest Exchange:   |          |  |  |  |  |
| FIRST: The name of the acquired limited liability company is: Infinity Direct Insurance LLC  |          |  |  |  |  |
| ECOND: The name of the acquiring entity is: Covida Holdings, LLC   |          |  |  |  |  |
| The jurisdiction of formation of the acquiring entity is: Florida  |          |  |  |  |  |
| The document number of the acquiring entity is: L14000015443   | 1794 Ver |  |  |  |  |
| The acquiring entity is a:<br>(entity type: corp, llc, lp etc.)  | 11       |  |  |  |  |
|  |          |  |  |  |  |
| <b>FIFTH:</b> The plan of interest exchange was approved by each acquiring entity that is a party to the interest exchange in accordance with the organic laws in its jurisdiction of formation, or  |          |  |  |  |  |
| The plan of interest exchange approval was not required, a statement to that effect.<br><b>EXTH:</b> The acquiring entity has agreed to pay to any members of the acquired entity with appraisal rights the mount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072.<br><b>EVENTH:</b> The effective date of the interest exchange, if the effective date of the interest exchange is not the ame as the date of filing of the articles of interest exchange, subject to the limitations in s. 605.0207 is |          |  |  |  |  |
| (Effective date cannot be prior to the date of filing or more than 90 days after the date of filing)<br>(Effective date cannot be prior to the date of filing or more than 90 days after the date of filing)<br>Infinity Direct Insurance LLC by:<br>Lewis Urivetzky, manager<br>Typed or printed name of signature<br>Cavida Holdings LL by:<br>Lewis Urivetzky, manager<br>Typed or printed name of signature<br>Typed or printed name of signature<br>Typed or printed name of signature  |          |  |  |  |  |

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Filing Fee:\$25.00Certified copy:\$30.00 (optional)