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(Requestor's Name)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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SCORE LANY OF STATE
ALLAHASSES, FLORMA

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Lewis-Greene Dressage, L	LC			
SUBJECT.	Name of Surviving Party			
The enclosed Certificate of Merger and fee	e(s) are submitted for filing.			
Please return all correspondence concernir	ng this matter to:			
Robert Rogers, Esq.				
Contact Person	**************************************			
Attorney at Law				
Firm/Company				
75 Vineyards Blvd.				
Address				
Naples, FL 34119				
City, State and Zip Code				
robertrogers@vineyardsnaples.com				
E-mail address: (to be used for future annua	al report notification)			
For further information concerning this ma	atter, please call:			
Robert Rogers	at (²³⁹) 353-1973			
Name of Contact Person	Area Code Daytime Telephone Number			
Certified copy (optional) \$30.00				
STREET ADDRESS:	MAILING ADDRESS:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
Clifton Building 2661 Executive Center Circle	P. O. Box 6327 Tallahassee, FL 32314			
Tallahassee, FL 32301	Tallallassee, FL 32314			

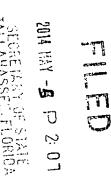
Articles of Merger For Florida Limited Liability Company

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:

Name	<u>Jurisdiction</u>	Form/Entity Type
Lisa Lewis-Greene, LLC	NJ	LLC
Lewis-Greene Dressage, LLC	FL	LLC
SECOND: The exact name, form/entity type	oe, and jurisdiction of the <u>survivi</u>	ng party are as follows:
Name	<u>Jurisdiction</u>	Form/Entity Type
Lewis-Greene Dressage, LLC	FL	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).



<u>FOUE</u>	CTH: Please check one of the	e boxes that a	ipply to survivi	ng entity: (if applicat	ole)				
Ø	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	s a domestic fil	ing 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:								
under SIXT more	H: This entity agrees to pay an ss.605.1006 and 605.1061-60 H: If other than the date of filthan 90 days after the date this of filling.	5.10 72 , F.S. ling, the dela	yed effective da	ate of the merger, wh	ich cannot be pri				
	NTH: Signature(s) for Each	Parte							
	of Entity/Organization:	-	ignature(s):		Typed or Printer Name of Individ				
	s-Greene Dressage, LLC	X	Poste	vio-Deene	Lisa Lewis-Gro				
Lisa I	Lewis-Greene, LLC		Juan Gen	xis. Dreene	Lisa Lewis-Gre	ene			
Corpo	rations:			, President or Office		······································			
Florid Non-F	al partnerships: a Limited Partnerships: lorida Limited Partnerships: ed Liability Companies:	Signature o Signatures Signature o		ner	rson				
Fees:	For each Limited Liability C For each Limited Partnership For each Other Business Ent	p:	\$25.00 \$52.50 \$25.00	For each Corpora For each General Certified Copy (Partnership:	\$35.00 \$25.00 \$30.00			



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to file a Articles of Merger pursuant to section 605.1025, Florida Statutes. This form is basic and may not meet all merger needs. The advice of an attorney is recommended.

Filing Fees:

\$25.00 for each Limited Liability Company

\$35.00 for each Corporation

\$52.50 for each Limited Partnership or

Limited Liability Limited Partnership

\$25.00 for each General Partnership or Limited

Liability Partnership

\$25.00 for each Other Business Entity

Certified Copy (optional):

\$30.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address

Street Address

Amendment Section
Division of Corporations

Amendment Section
Division of Corporations

P. O. Box 6327

Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

For further information, you may contact the Registration Section at (850) 245-6050.

Important Notice: Before filing this document, pursuant to s.605.0212(8), F.S., each party to the merger must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

CR2E080 (2/14)