114000077307

(Red	questor's Name)			
(Add	dress)			
bbA)	dress)	 		
(City	y/State/Zip/Phone	#)		
PICK-UP	MAIT	MAIL		
(Bus	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to F	Filing Officer:			
<u> </u>				

Office Use Only



500413408655 9 fective date 8.25.23

LLAHASSEE FLO

A. RAMSEY AUG 2 3 2023 CORPORATION SERVICE COMPANY

1201 Hays Street
Tallhassee, FL 32301

Phone: 850-558-1500									
	ACCOUNT NO.	: I20000	0000195						
	REFERENCE	: 948875	43.04256	,					
	AUTHORIZATION		grindle been						
	COST LIMIT	: \$ 80.0	00						
ORDER DATE : Au	gust 22, 2023								
ORDER TIME : 1	:43 PM								
ORDER NO. : 94	8875-010								
CUSTOMER NO:	4304256								
		• • • •	·						
ARTICLES OF MERGER									
	FFAS SERVICES	LLC							
INTO									

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

SERVICES LLC

FAMILY FIRST ADOLESCENT

XX CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Family First Adolescent Services 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:

Sonia Ravin Contact Person McGuireWoods LLP Firm/Company 77 West Wacker Dr., Suite 4100 Address Chicago, IL 60601

City, State and Zip Code

emehlman@hepfund.com

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

For further information concerning this matter, please call:

Sonia Ravin

Name of Contact Person

Daytime Telephone Number

 \square 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 (2/20)

Articles of Merger For Florida Limited Liability Company

FILED

2023 AUG 22 PM 12 24

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company (ies) in accordance with s. 605.1025. Florida Statutes.

FFAS Services LLC

Delaware

Limited liability company

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

Name

Form/Entity Type

Jurisdiction

Form/Entity Type

Family First Adolescent Services LLC

Florida

Form/Entity Type

Limited liability company

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

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 bo	avec that an	oly to cumárána an	stitus (if annticable)						
	Thease cheek one of the be	oxes mar ap	phy to starting en	mty. (If applicable)						
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 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:									
						<u> </u>				
ss.605.	L: This entity agrees to pay any r 1006 and 605.1061-605.1072, F L: If other than the date of filing	.S. g, the delaye	ed effective date of	the merger, which canno						
· · ·	ter the date this document is file	-	•							
12:0	01 a.m., Eastern Tin	ne, on <i>i</i>	August 25, 2	2023						
	If the date inserted in this block document's effective date on the				nts, this date will	not be listed				
SEVE!	NTH: Signature(s) for Each Par	rty:								
Name (of Entity/Organization:	<u>.</u>	Signature(s):		Typed or Pri Name of Ind					
	ly First Adolescent Service	estLC	Del		John E. "Budd					
	S Services LLC				John E. "Budd					
	O OCI VICES EEO				- Dada					
Corpor	rations:			President or Officer nature of incorporator.)						
	l partnerships:	_		er or authorized person						
	ida Limited Partnerships: Signatures of all general partners -Florida Limited Partnerships: Signature of a general partner									
	d Liability Companies:		of an authorized p							
Fees:	For each Limited Liability Con	npany:	\$25.00	For each Corporatio		\$ 35.00				
	For each Limited Partnership: For each Other Business Entity	•	\$52.50 \$25.00	For each General Pa Certified Copy (opt		\$25.00 \$30.00				
	To cach Other Duamess Entity	•	ن ن د د د ب	Cermien Coby (al)	<u></u>	\$ 30.00				