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PSR 10/8/14

COVER LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT. Ram	P Batra
SUBJECT:	
	Name of Surviving Party
The enclosed Certificate of Merger and	fee(s) are submitted for filing.
Please return all correspondence concern	ning this matter to:
Dr. Ram E	Batta
Ren P. Ba	Tra, LLC
Dr. Ram A Contact Person Rem P. Ba Firm/Company 5314 G. If Address 2-phryh. Us City, State and Zip Code	Links Blad
Address	
Zephryh.ds	FI 33541
City, State and Zip Code	•
no batra.	@asl.com
E-mail address: (to be used for future and	nual report notification)
	,
For further information concerning this t	
De Rom Bai	Tra. 813.783-2775
Name of Contact Person	77at (913).783-2775 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 Ft. 32314
Zon i Evecurive i enjer i ircie	131131198882 - 1 17314

Tallahassee, FL 32301



November 12, 2014

RAM P. BATRA 5316 GOF LINKS BLVD. ZEPHYRHILLS, FL 33541

SUBJECT: KUMARI V, LLC Ref. Number: L03000017873

We have received your document for KUMARI V, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

You must complete the enclosed Articles of Merger in order to merger the two LLC's

The attached form must be completed in order to file the 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) 245-6051.

Letter Number: 814A00024125

Barbara Bostick Regulatory Specialist II

www.sunbiz.org

Articles of Merger FILED For Florida Limited Liability Company SECTION SECTION OF STATE ORID

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:

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
Ram P. Bater Lic	Paseo	
Kumari V LL C	Pasco	
SECOND: The exact name, form/enti	ty type, and jurisdiction of th	e <u>surviving</u> party are as follows:
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
DAM P. RATRA LLC	Pasco	LLC

<u>THIRD</u>: 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>FOU</u>	<u>XTH:</u>	Please check one of th	ne boxes tha	t apply to surviv	ving entity: (if applic	able)		
<u>r</u>	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 fi	ling entity, the publ	ic organic record	l is attached.	
		entity is created by the ed liability partnership,				ed partnership or	a domestic	
	state.	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:						
					The second secon			
under SIXTI more t	ss.605 <u>H:</u> If o han 90	s entity agrees to pay a .1006 and 605.1061-60 other than the date of fi days after the date this. Signature(s) for Each	15.1072, F.S. ling, the de s document	ayed effective of	late of the merger, w	hich cannot be pf State:	orior to nor	
Name	of Ent	ity/Organization:		Signature(s):		Typed or Printed Name of Individual:		
ı	Ku	mari V LLC	, -	RR B	the	Rom	P Batra	
	Ra	mari V LLC m P Batra	ICC	RI Ba	tea	Rom	P Batta	
Florida Non-F	al parti Limi Iorida	nerships: ted Partnerships: Limited Partnerships: bility Companies:	(If no direct Signature Signature Signature	ors selected, signa	tner			
Fees:	For e	ach Limited Liability C ach Limited Partnershij ach Other Business Ent	Company: p:	\$25.00 \$52.50 \$25.00	For each Corpo For each Genera Certified Copy	al Partnership:	\$35.00 \$25.00 \$30.00	