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(Re	equestor's Name)	<del></del>			
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## **COVER LETTER**

**MAILING ADDRESS:** 

Division of Corporations P. O. Box 6327

Tallahassee, FL 32314

**Amendment Section** 

TO: Amendment Section Division of Corporations
SUBJECT: ROBATE PROPERTIES 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:
GARY OTTO  Contact Person
PROBATE PROPERTIES LLC Firm/Company 4491 SHRUNG RAAD Ste 203
Firm/Company
4491 Stirling KAAD Ste 203
/ Address
DAUR F (33314 City, State and Zip Code
City, State and Zip Code
954611 @ AOL. COM E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (954) 257-7958  Area Code Daytime Telephone Number
Certified copy (optional) \$30.00

:

CR2E080 (2/14)

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## 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:

Robate ProPerties	LLC <u>DELAWARE</u>	Form/Entity Type
	_	
COND: The exact name, form/entit	y type, and jurisdiction of the surviv	ving party are as follows:
<del>me</del>	<u>Jurisdiction</u>	Form/Entity Type
ROBATE PROPERTIES	UC 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).

1016 JAN 20 PM 2:0

FOUR'	<b><u>TH:</u></b> Please check one of the b	oxes that apply to	surviving ent	ity: (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.							
	This entity is created by the merger and is a domestic filing entity, the public organic record is attached.							
0	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.							
<b>a</b>	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:							
	This entity agrees to pay any 1006 and 605.1061-605.1072, I		raisal rights t	he amount, to which members	are entitled under			
	!: If other than the date of filing ter the date this document is file				rior to nor more than 90			
	If the date inserted in this block locument's effective date on the			atutory filing requirements, th	is date will not be listed			
SEVE	NTH: Signature(s) for Each Pa	rty:	<b>A</b>	Typed o	or Printed			
+ KRG	DATE PROPERTIES BATE PROPERTIES	UC (FI)	iture(s):	Name of I				
Corpor	ations.	Chairman Vice	Chairman P	resident or Officer				
(If no directors selected, s								
	eral partnerships: Signature of a general partner or authorized person							
	da Limited Partnerships: Signatures of all general partners Florida Limited Partnerships: Signature of a general partner							
	orida Limited Partnerships: I Liability Companies:	Signature of a g						
Fees:	For each Limited Liability Co	mnanv <sup>.</sup>	\$25.00	For each Corporation:	\$35.00			
<u></u>	For each Limited Partnership:	• •	\$52.50	For each General Partnersh				
	For each Other Business Entity		\$25.00	Certified Copy (optional)				