1500213481

(Req	questor's Name)			
(Add	lress)			
(Add	Iress)			
(City,	/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	iness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to F	iling Officer:			

Office Use Only



900306825219

2017 DEC 19 A D: 0

Multa

DEC 2 0 2017 T. LEANEUR CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 967159 5052101

AUTHORIZATION : mulbelenan

COST LIMIT : \\$ \95\.00

ORDER DATE : December 19, 2017

ORDER TIME : 1:22 PM

ORDER NO. : 967159-045

CUSTOMER NO: 5052101

ARTICLES OF MERGER

SPREE COMMERCE INC.

INTO

FIRST DATA MERCHANT SERVICES LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Roxanne Turner

EXAMINER'S INITIALS:

COVER LETTER

TO:	Amendment Section Division of Corporations					
CHRI	First Data Merchant Services LLC	3				
зовз	BJECT: First Data Merchant Services LLC Name of Surviving Party					
The ea	nclosed Certificate of Merger and fee((s) are submit	ted for filing.			
Please	e return all correspondence concerning	g this matter t	o:			
Gretcl	hen Herron					
	Contact Person					
First I	Data Corporation					
	Firm/Company					
6855	Pacific Street					
	Address					
Omah	na NE 68106					
	City, State and Zip	Code				
	E-mail address: (to be used for futur	e annual repo	ort notification)	_		
For fu	urther information concerning this mat	ter, please ca	11:			
Gretcl	hen Herron	at (951-70	10		
	Name of Contact Person		Area Code	Daytime Telephone Number		
0	Certified copy (optional) \$30.00					
STREET ADDRESS:		MAILING ADDRESS:				
Amendment Section			Amendment Section			
Division of Corporations			Division of Corporations			
Clifton Building			P. O. Box 6327			
	Executive Center Circle hassee, FL 32301		Tallahassee, FL	. 32314		

CR2E080 (2/14)

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						
TruBeacon, Inc.	Delaware	corporation						
Spree Commerce Inc.	Delaware	corporation						
SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:								
Name	Jurisdiction	Form/Entity Type						
First Data Merchant Services LLC	Florida	limited liability company						

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).

1 of 3

FOUR'	TH: Please check one of the b	oxes that apply	to surviving en	tity: (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.							
0	This entity is created by the merger and is a domestic filing entity, the public organic record is attached.							
a	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.							
a	This entity is a foreign entity to mailing address to which the di Florida Statutes is:	hat does not ha epartment may	ve a certificate of send any proce	of authority to transact business i ss served pursuant to s. 605.0117	n this state. The 7 and Chapter 48,			
			appraisal rights	the amount, to which members a	ure entitled under			
	1006 and 605,1061-605.1072, I							
	I: If other than the date of filing ter the date this document is file			the merger, which cannot be price	or to nor more than 90			
•	ber 31, 2017	ed by the From	sa soparanon c	Tomas.				
	If the date inserted in this block document's effective date on the			tatutory filing requirements, this	date will not be listed			
SEVE	NTH: Signature(s) for Each Pa	irty:		TD 1	D: A 1			
Name (of Entity/Organization:	S	ignature(s):	Typed or Name of Inc				
	icon, Inc.	;	Inno	Nu Gretchen	Herron, VP			
First D	ata Merchant Services LLC		min	Tun Gretchen	Herron, VP			
Spree (Commerce Inc.		Dung	tun Gretchen	Herron, VP			
								
Corpor	rations:	(If no direct	ors selected, sig	President or Officer nature of incorporator.)				
	eneral partnerships: Signature of a general partner or authorized person							
	orida Limited Partnerships: Signatures of all general partners							
	Non-Florida Limited Partnerships: Signature of a general partner Limited Liability Companies: Signature of an authorized person							
Limite	d Liability Companies:	Signature of	an autnorized p	erson				
Fees:	For each Limited Liability Co	mpany:	\$25.00	For each Corporation:	\$35.00			
- 120.	For each Limited Partnership:		\$52.50	For each General Partnershi				
	For each Other Business Entit		\$25.00	Certified Copy (optional):				
		-						