Division of Corporations Electronic Filing Cover Sheet

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(((H21000003688 3)))



H210000036883ABC

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To:

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I2016000C017
Phone : (855)498-5500
Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future — annual report mailings. Enter only one email address please.

Email	Address:		
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MERGER OR SHARE EXCHANGE ILIC FLORIDA, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$58.75

180

TO:	Amendment Section Division of Corporations				
CI ID T	ECT: ILIC Florida, LLC				
aubj.	Name of Surviving Party				
The en	nclosed Certificate of Merger and fee(s	s) are submitted	for fil	ling.	
Please	return all correspondence concerning	this matter to:			
Am	y Pomeroy				
	Contact Person				
	Firm/Company				
610	5 Spirit Lake Road				
	Address				
Wir	iter Haven, FL 33880				
	City, State and Zip C	Code	-		
apo	me26672@aol.com				
	E-mail address: (to be used for future	e annual report i	notific	ation)	
For fu	rther information concerning this matt	er, please call:			
		at (,)	
	Name of Contact Person	Arca C	ode	Daytime Telephone Number	
	Certified copy (optional) \$30.00				
STREET ADDRESS:		-		NG ADDRESS:	
Amendment Section			Amendment Section		
Division of Corporations			Division of Corporations		
Clifton Building				x 6327	
	Executive Center Circle	Ta	llahas	see, FL 32314	
Tallah	nassee, FL 32301				

CR2E080 (2/20)

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.

Name	<u>Jurisdiction</u>	Form/Entity Type
ILIC Florida, LLC	Florida	LLC
		
	•	
SECOND: The exact name, form/ent	<u>Jurisdiction</u>	Form/Entity Type
	•	

<u>FOUR</u>	TH: Please check one of the b	oxes that ap	ply to surviving en	tity: (if applicable)				
	This entity exists before the mare attached.	erger and is	a domestic filing e	ntity, the amendme	nt, if any to its publ	ic organic record		
	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.							
Ø	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:							
	6105 Spirit Lake Road							
	Winter Haven, FL	33880						
Note: as the o	1006 and 605.1061-605.1072, 1: If other than the date of filing the the date this document is file. If the date inserted in this block document's effective date on the NTH: Signature(s) for Each Part of Entity/Organization:	g, the delayered by the Floored codes not me e Departmen	orida Department of	f State:	rements, this date v	vill not be listed		
ILIC Florida, LLC			/s/ Fred	I. Boling, Jr.	Fred J. B	oling, Jr.		
ILIC	Florida, LLC		/s/ Fred	J. Boling, Jr.	Fred J. B	soling, Jr.		
Corpor	rations:			resident or Officer				
				nature of incorpora or or authorized per				
			s of all general par		NJ11			
			of a general partne					
	d Liability Companies:		of an authorized p					
Fees:	For each Limited Liability Company:		\$25.00 For each Corporati		oration:	\$35.00		
	For each Limited Partnership:		\$52.50	For each Gener		\$25.00		
	For each Other Business Entit		\$25.00	Certified Copy	y (optional):	\$30.00		