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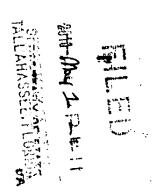
(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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T. LINGTONION

Miller

COVER LETTER

TO:	Amendment Section Division of Corporations				
SHRI	ECT: Rocwell Investments LLC				
SODJ	Name of Surviving Party				
The en	nclosed Certificate of Merger and fe	e(s) are submi	tted for filing.		
Please	e return all correspondence concerni	ng this matter	to:		
Justin	Basil				
	Contact Perso	on			
Rocwe	ell Investments				
	Firm/Compar	ny			
2419 V	W Kennedy Blvd				
	Address				
Tampa	a, FL 33609				
	City, State and Zi	p Code			
justin@	@rocwellinvestments.com				
	E-mail address: (to be used for fut	ure annual repo	ort notification)	_	
For fu	orther information concerning this m	natter, please ca	ıll:		
Justin	Basil	at (⁷²⁷	643-64	183	
	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		Tallahassee, FL	. 32314	
Tallah	nassee, FL 32301				

CR2E080 (2/14)



February 28, 2018

JUSTIN BASIL 2419 W KENNEDY BLVD TAMPA, FL 33609

SUBJECT: ROCWELL INVESTMENTS, LLC

Ref. Number: L16000203411

We have received your document for ROCWELL INVESTMENTS, LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Tahe mergering LLC most file the 2018 Annual Report before the merger can be filed.

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) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 518A00004149

18 TAY -1 PM 2: 45
TETARY OF STATE
HASSEE, FLORIDA

Articles of Merger For Florida Limited Liability Company

FILED

with a 405 1005 Elevide Statutes		ida Limited May 1 F tordance TAELAHASSELTELORISA
Name Forest Winston LLC	<u>Jurisdiction</u>	Form/Entity Type LLC
	Florida	
SECOND: The exact name, form/entity	type, and jurisdiction of the surv	iving party are as follows:
Name	<u>Jurisdiction</u>	Form/Entity Type
Rocwell Investments LLC	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).

FOURTH: Please check one of the boxes that apply to surviving entity: (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. 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: **FIFTH:** This entity agrees to pay any members with appraisal rights the amount, to which members are entitled under ss.605.1006 and 605.1061-605.1072, F.S. SIXTH: If other than the date of filing, the delayed effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State: Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. **SEVENTH:** Signature(s) for Each Party: Typed or Printed Name of Entity/Organization: Signature(s) Name of Individual: Justin Basil Justin Basil Corporations: Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporator.) Signature of a general partner or authorized person General partnerships: Florida Limited Partnerships: Signatures of all general partners Non-Florida Limited Partnerships: Signature of a general partner Limited Liability Companies: Signature of an authorized person **Fees:** For each Limited Liability Company: \$25.00 For each Corporation: \$35.00 For each Limited Partnership: For each General Partnership: \$52.50 \$25.00

\$25.00

Certified Copy (optional):

\$30.00

For each Other Business Entity: