

617000002307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

6177

Office Use Only



800294005228

01/12/17--01013--022 \*\*25.00

02/15/17--01019--007 \*\*25.00

*merger*

FEB 20 2017

R. WHITE

17 FEB 15 AM 11:35



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 17, 2017

VLADIMIR GOFAIZEN  
60 SW 13TH ST APT 3026  
MIAMI, FL 33130

SUBJECT: INAFLO LLC  
Ref. Number: W17000003745

We have received your document for INAFLO 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):

Because Chapters 607, 605, and 620, Florida Statutes, require the certificate of conversion and the documentation forming the resulting Florida business entity be filed simultaneously, the enclosed certificate of conversion cannot be filed. Our records reflect the documentation forming the resulting Florida business entity was previously filed with this office. Therefore, we are enclosing the form and instructions for filing a merger.

Please return the corrected original and one copy of 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) 245-6052.

Nadira D McClees-Sams  
Regulatory Specialist II  
New Filing Section

Letter Number: 517A00000928

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** INAFLO 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:

VLADIMIR GOFAIZEN

Contact Person

INAFLO LLC

Firm/Company

60 SW 13TH ST APT 3026

Address

MIAMI FL 33130

City, State and Zip Code

VLADIMIR.GOFAIZEN@INAFLO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VLADIMIR GOFAIZEN

Name of Contact Person

at ( 404 )

Area Code

518-2454

Daytime Telephone Number

☐ Certified copy (optional) \$30.00

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

17 FEB 1955 AM 11:35

**FIRST:** The exact name, form/entity type, and jurisdiction for each merging party are as follows:

**SECOND:** The exact name, form/entity type, and jurisdiction of the **surviving** party are as follows:

**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 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:

60 SW 13TH ST APT 3026

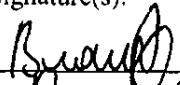
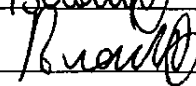
MIAMI FL 33130

**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:

Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
INAFLO LLC, FLORIDA		VLADIMIR GOFAIZEN
INAFLO LLC, GEORGIA		VLADIMIR GOFAIZEN

Corporations:

Chairman, Vice Chairman, President or Officer  
(If no directors selected, signature of incorporator.)

General partnerships:

Signature of a general partner or authorized person

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

<b>Fees:</b> For each Limited Liability Company:	\$25.00	For each Corporation:	\$35.00
For each Limited Partnership:	\$52.50	For each General Partnership:	\$25.00
For each Other Business Entity:	\$25.00	<b>Certified Copy (optional):</b>	\$30.00

25.00 CREDIT FROM FILING ARTICLES OF CONVERSION SHOULD BE APPLIED TOWARDS BALANCE. 25.00 CHECK FOR SECOND PART OF THE BALANCE IS ATTACHED.