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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 4/26/2022

PRIORITY Routine

OUR REF_#_(Order_ID#) Megan

ORDER ENTITY

CODE TALK, LLC

PI	LEA	SE	PERFORM TH	E FOLLOWING	SERVICES:

CODE TALK, LLC

Please file the attached merger document.

NOTES:

\$50.00 Authorized

Email address for annual report reminders: sferraro@swlaw.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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	
CODE TALK, LLC	Florida	Limited liability company	
	121-27800		
	-		
SECOND: The exact name, form/entity type	e, and jurisdiction of the <u>surviving</u> p	arty are as follows:	
Name	Jurisdiction	Form/Entity Type	
LIFELEY, 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).

2022 APR 26 AM 9: 07
SECRETARY OF STATE

<u>FOUR</u>	CTH: Please check one of the	boxes that apply	to surviving er	itity: (if applicable)			
Z	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 n	nerger and is a d	omestic filing e	ntity, the public organic	record is attache	d.	
	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 mailing address to which the Florida Statutes is:						
ss.605 SIXTI	H: This entity agrees to pay any 1006 and 605.1061-605.1072, H: If other than the date of filir fter the date this document is fi	F.S. ng, the delayed e	ffective date of	the merger, which can			
as the	If the date inserted in this bloc document's effective date on the NTH: Signature(s) for Each Page 1	e Department of					
Name of Entity/Organization:		Si	Signature(s):		Typed or Printed Name of Individual:		
CODI	E TALK, LLC		RC		Peter Strack		
LIFEL	EY, LLC		PC		Peter Steak LAFT 26		
Genera Florida Non-F	rations: al partnerships: a Limited Partnerships: lorida Limited Partnerships: d Liability Companies:	(If no director Signature of Signatures of Signature of	rs selected, sig	er	H 9:	S	
Fees:	For each Limited Liability Co For each Limited Partnership: For each Other Business Entit		\$25.00 \$52.50 \$25.00	For each Corporati For each General F Certified Copy (or	artnership:	\$35.00 \$25.00 \$30.00	