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(((H180003460573)))



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To:

Division of Corporations

Fax Number : (950)617-6380

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH LLP OF BOCA RATON

Account Number : 076376001555 : (803)255-9617 Phone Fax Number : (561:483-7321

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

tpeterson@altmancos.com Email Address:

## MERGER OR SHARE EXCHANGE New ADC, LLC

Certificate of Status	0
Certified Copy	0
Page Count	4
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	COVER LETTER 2						
TO: Amendment Section Division of Corporations							
SUBJECT: NEW ADC, LLC							
Name of Surviving Party							
The enclosed Certificate of Merger and fee(s) a	are submitted for filing.						
Please return all correspondence concerning the	nis matter to:						
MATTHEW THOMPSON							
Contact Person							
BCRA, LLC							
Firm/Company							
1905 NW CORPORATE BLVD., SUITE 310							
Address	·						
BOCA RATON, FLORIDA 33431							
City, State and Zip Coc	de						
THAT THE DATE OF THE PROPERTY							
MATTHEW.THOMPSON@NELSONMULLINS.COM  E-mail address: (to be used for future annual report notification)							
•							
For further information concerning this matter, please call:							
MATTHEW THOMPSON	at ( 551 ) 218-6504						
Name of Contact Person	Area Code Daytime Telephone Number						
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						
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314						

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## 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: Form/Entity Type <u>Jurisdiction</u> LLC **FLORIDA** NEW ADC, LLC FLORIDA LLC NEW TAC, LLC SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows: Form/Entity Type Jurisdiction Name 1 FLORIDA NEW ADC, 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).

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<b>FOUR</b>	TH: Please check one of the b	oxes that apply	to surviving enti	ty: (if applicable)				
0	This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic recordere attached.							
	This entity is created by the merger and is a domestic filing entity, the public organic record is attached.							
0	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 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:							
ss.605	.1006 and 605.1061-605.1072, I	F.S.		he amount, to which members are ent				
SIXTI	H: If other than the date of filin fter the date this document is fil	g, the delayed	effective date of t da Department of	he merger, which cannot be prior to r State:	for more than 90			
	MDER 3, 2018							
Note:	If the date inserted in this block document's effective date on th	k does not mee e Denartment i	t the applicable st of State's records.	atutory filing requirements, this date	WILL DOT DE LISTER			
SEYE	NTH: Signature(s) for Each Pa	arty:		Typed or Print				
Name	of Entity/Organization:	5	ignature(s):	Name of Individu	inl:			
NEW 2	ADC, LLC	á	<- V.	TIMOTHY A. PE	TERSON			
	rac, llc		V 60	TIMOTHY A. PE	ETERSON			
Corpo	rations:	Chairman, (If no direc	Vice Chairman, P tors selected, sign	resident or Officer wature of incorporator.)				
Gener	al partnerships:	Signature o	f a general partoc	r or authorized person				
Florid	rida Limited Partnerships: Signatures of all general partners							
Non-F	Florida Limited Partnerships: ed Liability Companies:	Signature of Signature of	r a general parux f an authorized p	erson				
Citing		_			<b>\$</b> 35.00			
Fees:	For each Limited Liability Co	ompany:	\$25.00 \$52.50	For each Corporation:  For each General Partnership:	\$25.00			
	For each Limited Partnership		\$32.30 \$25.00	Certified Copy (optional):	\$30.00			