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| (R                      | equestor's Name)       |
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| (B                      | usiness Entity Name)   |
| (D                      | Pocument Number)       |
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EFFECTIVE DATE

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DEC 27 2018

I ALBRITTON

PI

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 557302 5015777

grane

AUTHORIZATION

COST LIMIT

\_\_\_\_\_

ORDER DATE: December 24, 2018

ORDER TIME : 9:50 AM

ORDER NO. : 557302-010

CUSTOMER NO: 5015777

## ARTICLES OF MERGER

EXPRESS NORTHEAST STORES, LLC

INTO

EXPRESS NORTHEAST FL, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Roxanne Turner

EXAMINER'S INITIALS:

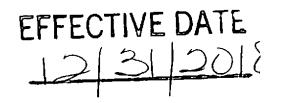
## **COVER LETTER**

| то:                          | Amendment Section Division of Corporations |                |                          |            |                |  |
|------------------------------|--|----------------|--------------------------|------------|----------------|--|
| SHRJ                         | ECT: Express Northeast FL, LLC             |                |                          |            |                |  |
| 0023                         | Name of Surviving Party                    |                |                          |            |                |  |
| The er                       | nclosed Certificate of Merger and fee(     | s) are submit  | ted for filing.          |            |                |  |
| Please                       | return all correspondence concerning       | this matter t  | o:                       |            |                |  |
| Heidi I                      | I. Hansen                                  |                |                          |            |                |  |
|                              | Contact Person                             |                |                          |            |                |  |
| Fein, S                      | Such, Kahn & Shepard, P.C.                 |                |                          |            |                |  |
|                              | Firm/Company                               |                | <del></del>              |            |                |  |
| 7 Cent                       | tury Drive, Suite 201                      |                |                          |            |                |  |
|                              | Address                                    | -              |                          |            |                |  |
| Parsip                       | pany, New Jersey 07054                     |                |                          |            |                |  |
|                              | City, State and Zip (                      | Code           | <del></del>              |            |                |  |
| beneh(                       | @expmgnt.com                               |                |                          |            |                |  |
|                              | E-mail address: (to be used for future     | e annual repo  | ort notification)        | -          |                |  |
|                              |  |                |                          |            |                |  |
| For fu                       | rther information concerning this matt     | ter, please ca | H:                       |            |                |  |
| Heidi I                      | Hansen                                     | at (           | 867-45                   | 60         |                |  |
|                              | Name of Contact Person                     |                |                          | Daytime Te | lephone Number |  |
| Ø                            | Certified copy (optional) \$30.00          |                |                          |            |                |  |
| STRE                         | ET ADDRESS:                                |                | MAILING AD               | DRESS:     |                |  |
| Amendment Section            |  |                | Amendment Section        |            |                |  |
| Division of Corporations     |  |                | Division of Corporations |            |                |  |
| Clifton Building             |  |                | P. O. Box 6327           |            |                |  |
| 2661 Executive Center Circle |  |                | Tallahassee, FL 32314    |            |                |  |

CR2E080 (2/14)

Tallahassee, FL 32301

## 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.

| <u>Name</u>                            | <u>Jurisdiction</u>                     | Form/Entity Type             |
|--|---|------------------------------|
| Express Northeast Stores, LLC          | New Jersey                              | LLC                          |
|  |   |                              |
|  |   |                              |
|  |   |                              |
| ······································ |   |                              |
| SECOND: The exact name, form/er        | itity type, and jurisdiction of the sur | viving party are as follows: |
| <u>Name</u>                            | Jurisdiction                            | Form/Entity Type             |
|  |   |                              |

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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| FOUR            | RTH: Please check one of the  | boxes that app                   | ly to surviving co                         | ntity: (if applicabl                     | e)  |                          |  |  |  |
|-----------------|---|----------------------------------|--|--|---|--------------------------|--|--|--|
| <b>7</b>        | 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. |                                  |  |  |   |                          |  |  |  |
| 0               | This entity is a foreign entity mailing address to which the Florida Statutes is:   | that does not l<br>department ma | nave a certificate<br>ay send any proce    | of authority to tra                      | nsact business in this s<br>it to s. 605.0117 and C | state. The<br>hapter 48, |  |  |  |
|                 |   |                                  |  |  |   | <del></del>              |  |  |  |
| FIFTI<br>ss.605 | 1: This entity agrees to pay any 1006 and 605.1061-605.1072,  | members with                     | h appraisal rights                         | the amount, to wh                        | nich members are entit                              | led under                |  |  |  |
| SIXTI           | 1: If other than the date of filing   | ng, the delayed                  | effective date of                          | the merger, which                        | h cannot be prior to no                             | r more than 90           |  |  |  |
| days a          | fter the date this document is fi   | led by the Flor                  | ida Department o                           | of State:                                | - came of piles to no                               | more than 70             |  |  |  |
| Decem           | ber 31, 2018  |                                  |  |  |   |                          |  |  |  |
| as the          | If the date inserted in this bloc<br>document's effective date on the   | ne Department                    | et the applicable s<br>of State's records  | statutory filing req<br>s.               | uirements, this date w                              | ill not be listed        |  |  |  |
| SEVE            | NTH: Signature(s) for Each P  | arty:                            |  |  | Typed or Printed                                    | 1                        |  |  |  |
| Name            | of Entity/Organization:   |                                  | Signature(s):                              | $\overline{}$                            | Name of Individual                                  |                          |  |  |  |
| Expres          | s Northeast FL, LLC   | ,                                | Kur  |  | Ronald Lubin  |                          |  |  |  |
| Expres          | s Northeast Stores, LLC   |                                  | Jen-                                       |  | Ronald Lubin  |                          |  |  |  |
|                 |   |                                  | ***************************************    |  | ·   | <u></u>                  |  |  |  |
| Corpor          | rationer  | Chairman                         | Vice Chairman I                            | President or Office                      |   |                          |  |  |  |
| Corpor          | ations.   |                                  |  | resident of Office<br>nature of incorpor |   |                          |  |  |  |
|                 | l partnerships:   | Signature o                      | f a general partne                         | er or authorized po                      |   |                          |  |  |  |
|                 | Florida Limited Partnerships: Signatures of all general partners  |                                  |  |  |   |                          |  |  |  |
|                 | orida Limited Partnerships:<br>d Liability Companies:   |                                  | of a general partner<br>of an authorized p |  |   |                          |  |  |  |
| Fees:           | For each Limited Liability Co   | ımnanv.                          | \$25.00                                    | For each Corp                            | ooration:   | \$35.00                  |  |  |  |
|                 | For each Limited Partnership.   |                                  | \$52.50                                    |  | eral Partnership:                                   | \$25.00                  |  |  |  |
|                 | For each Other Business Entire  |                                  | \$25.00                                    |  | py (optional):                                      | \$30.00                  |  |  |  |