

LI 8000268187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

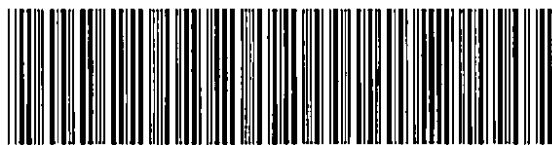
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

2257

Office Use Only



400321393844

FILING CANCELLED
DUE TO RETURNED CHECK

01/07/13--01001--001 **25.00

11/29/18--01023--003 **25.00

JAN 04 2019
S. YOUNG

FILED
2018 NOV 29 PM 1:35
JAN -4 PM 2:10
TALLAHASSEE, FLORIDA
STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 30, 2018

MAXIM ISTOMIN
CROWD GAMES, LLC
215 W COLLEGE AVENUE #514
TALLAHASSEE, FL 32301

SUBJECT: CROWD GAMES, LLC
Ref. Number: L18000268187

FILING CANCELLED
DUE TO RETURNED CHECK

RECEIVED
19 JAN -4 PM 1:53
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for CROWD GAMES, LLC and check(s) totaling \$25.00. However, the document has not been filed and is being returned for the following reason(s):

There is a balance due of \$25.00. Please return a copy of this letter to ensure your money is properly credited.

THE FEE IS 25.00 FOR EACH LIMITED LIABILITY COMPANY

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 118A00024442

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CROWN GAMES, 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:

MAXIM ISTOMIN
Contact Person

CROWN GAMES, LLC
Firm/Company

215 W. College Ave., #514
Address

TALLAHASSEE, FL, 32301
City, State and Zip Code

maxim.istomin@gmail.com
E-mail address: (to be used for future annual report notification)

FILING CANCELLED
DUE TO RETURNED CHECK

For further information concerning this matter, please call:

MAXIM ISTOMIN at (305) 393-3508
Name of Contact Person Area Code 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

FILING CANCELLED
DUE TO RETURNED CHECK

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:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
MOROZ, LLC.	DELAWARE	LLC

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

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
CROWD GAMES, 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).

FILED
19 JAN -4 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FILING CANCELLED
DUE TO RETURNED CHECK**

FOURTH: Please check one of the boxes that apply to surviving entity: (if applicable)

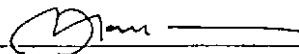
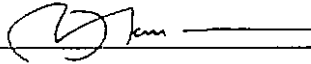
- ☒ This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record are attached.
- ☐ This entity is created by the merger and is a domestic filing entity, the public organic record is attached.
- ☐ This entity is created by the merger and is a 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 not 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:
MOROZ, LLC.		MAXIM ISTOMIN
CROWD GAMES, LLC.		MAXIM ISTOMIN
_____	_____	_____
_____	_____	_____

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

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