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### **COVER LETTER**

TO: Amendment Section	•	
Division of Corporations		
SUBJECT: BeLive LLC		
	Name of Surviving Party	
The enclosed Certificate of Merger and f	cc(s) are submitted for filing.	

Please return all correspondence concerning this matter to:

Noel Langerman
Contact Person
Karp & Langerman, P.C.
Firm/Company
185 Plains Road, Ste 209E
Address
Milford, CT 06461
City, State and Zip Code

john@belivestore.com

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

For further information concerning this matter, please call:

Noel Langerman	<sub>at (</sub> 203	,876-0606	
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

CR2E080 (2/20)

# 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.

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

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<u>FOUR</u>	TH: Please check one of the b	oxes that apply	to surviving en	ity: (if applicable)	ļ			
v	This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public or 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 mailing address to which the of Florida Statutes is:							
	<u>I:</u> This entity agrees to pay any 1006 and 605.1061-605.1072.		appraisal rights	the amount, to which r	nembers are entitle	d under		
	4: If other than the date of filin fter the date this document is fil	· .		~	not be prior to nor	more than 90		
·								
	If the date inserted in this block document's effective date on th				nents, this date will	l not be listed		
SEVE	NTH: Signature(s) for Each Pa	arty:		,	Typed or P <b>r</b> i	nted		
Name	of Entity/Organization;	Si	gnature(s):		Name of Ind			
Bel	_ive LLC	/_			Noel Langer	man		
Bel	_ive				Noel Langer	man		
Corpo	rations:			resident or Officer nature 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								
	d Liability Companies:		an authorized p					
Fees:	For each Limited Liability Co	mpany:	\$25.00	For each Corporat	ion:	\$35.00		
	For each Limited Partnership:	-	\$52.50	For each General		\$25.00		
	For each Other Business Entit	.V.	\$25.00	Certified Copy (c	PRIONAL):	\$30.00		