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# 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date:

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Name:	WD Schorsch Florida LLC	
Document #:		
Order #:	14814589	

Certified Copy of Arts & Amend:				
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Certificate of Good Standing:				
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	Thank you!

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### Articles of Merger For Florida Limited Liability Company

# FILED

2023 MAR -6 PM 1:09

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company (199) 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	Jurisdiction	Form/Entity Type
WD Schorsch Florida LLC	Florida	LLC
W D Schorsch LLC	Illinois	LLC

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

Name	Jurisdiction	Form/Entity Type
W D Schorsch 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).

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

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- 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 nor 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:

WD Schorsch Florida LLC W D Schorsch LLC

Signature(s)

Typed or Printed Name of Individual:

William D. Schorsch

William D. Schorsch

Corporations:

General partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships: Limited Liability Companies: Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporator.) Signature of a general partner or authorized person Signatures of all general partners Signature of a general partner Signature of an authorized person

Fees:For each Limited Liability Company:\$25.00For each Corporation:\$35.00For each Limited Partnership:\$52.50For each General Partnership:\$25.00For each Other Business Entity:\$25.00Certified Copy (optional):\$30.00

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WD Schorsch Horida LLC (Name of the Limited Liability Compa (A Florida Limited L	ny as it now uppears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on January 2, 2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
W D Schorsch LLC		
The new name must be distinguishable and contain the words "Limited Liabil	hty Company," the designation "LLC" or i	the abbreviation "L L.C."
Enter new principal offices address, if applicable:		
<u>(Principal office address MUST BE A STREET ADDRESS)</u>		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		name of the new req
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the	name of the new reg

Name of New Registered Agent:	William D. Schorsch	
New Registered Office Address:	124 Victory Dr.	
<u></u>	Enter	Florida street uddress
	Jupiter	Florida
	City	Zip Code

# New Registered Agent's Signature, if changing Registered Agent:

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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

## MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Namc</u>	Address	Type of Action
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# D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	March 3	
_		Signature of a member or authorized representative of a member
	William I	D. Schorsch Typed or printed name of signee
		Typed of prince name of Signed

Filing Fee: \$25.00