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TO:

Amendment Section Division of Corporations

SUBJECT: ECM Management Group, 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:

Heidi Gonzales/Jessica Roberts

Contact Person

Frilot, LLC

Firm/Company

1100 Poydras St., Ste. 3700

Address

New Orleans, LA 70163

City, State and Zip Code

efineran@frilot.com

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

For further information concerning this matter, please call:

Heidi Gonzales

_{at (}504

5998067

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.

FIRST: The exact name, form/entity type, and jurisdiction for each merging party are as follows:

n

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).

<u>FOUI</u>	RTH: Please check one of the	boxes that a	apply to surviving er	ntity: (if applicable)			
V	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 n	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.							
		s entity is a foreign entity that does not have a certificate of authority to transact business in this state. The illing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 48, rida Statutes is:						
	·							
Note: as the	If the date inserted in this block document's effective date on th	k does not i e Departme	neet the applicable s	statutory filing requ	nirements, this date w	ill not be listed		
SEVENTH: Signature(s) for Each Party: Name of Entity/Organization: ECM Management Corp.		Signature(s): Edward C. Mikkelsen			Typed or Printed Name of Individual: President			
				Preside				
ECM Management Group, LLC		Edward C. Mikkelsen		Manage	Manager			
Gener Florid Florid	rations: al partnerships: a Limited Partnerships: Florida Limited Partnerships: ed Liability Companies:	(If no di Signatur Signatur Signatur	nn, Vice Chairman, lessences selected, signer of a general partners of all general partners of a general partner of a general partner of an authorized partners of an authorized partners.	nature of incorpor er or authorized pe tners er	ator.)			
ees:	For each Limited Liability Co For each Limited Partnership: For each Other Business Entit	ility Company: \$25.00 For each Corporation: \$35.00 nership: \$52.50 For each General Partnership: \$25.00		\$35.00 \$25.00				