Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H240004169413)))



H240004169413ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : JONES FOSTER P.A. Account Number : 076077003231 Phone : (561)650-0471 Fax Number : (561)650-5300

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*

MERGER OR SHARE EXCHANGE 923 HOLDINGS LLC

J. HORNE DEC 2 6 2024

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$58.75

Electronic Filing Menu Corporate Filing Menu

Help

CR2E080 (2/20)

Ha40004169413

## COVER LETTER

	ndment Section ion of Corporations	· ·	
SUBJECT: _	923 Holdings LLC	· :	
		Name of Survi	ving Party
The enclosed	Certificate of Merger and	fee(s) are submitted for f	iling.
Please return	all correspondence concern	ning this matter to:	
Jordan	Johansen		
	Contact Per	son	•
Jones I	Foster P.A.		
	Firm/Compa	any	•
505 So	uth Flagler Drive, Suite 11	100	
	Address		•
West P	alm Beach, FL 33401		
	City, State and 2	Cip Code	•
		:	
	e@jonesfoster.com		<del></del>
r-maji	address: (to be used for fi	sture annual report notific	cation)
		:	
For further inf	formation concerning this i	: matter, please call:	
Jordan Jo	hansen	at ( 561	v 650-0432
	e of Contact Person	Area Code	Daytime Telephone Number
☐ Certif	ied copy (aptional) \$30.00	) <u>,</u>	
STREET AD	DRESS;		NG ADDRESS:
Amendment S			nent Section
Division of Co			of Corporations
Clifton Buildi		P. O. Bo	
	re Center Circle	Tallahas	ssee, FL 32314
Tallahassee, F	P 36301	•	
		:	

## Articles of Merger For Florida Limited Liability Company

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ics) in accordance with s. 605.1025, Florida Statutos.

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

Name	<u>Jurisdiction</u>	Form/Entity Type
923 Holdings LL.C	Florida	LIC TO
Meta Holdings, LLC	Florida	LLC
	· ·	
	:	
SECOND: The exact name, form/entity to	ype, and jurisdiction of the <u>survivi</u>	ng party are as follows:
Name	<u>Jurisdiction</u>	Form/Entity Type
923 Holdings LLC	<u>Florida</u>	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).

+1240004169413

1001	CAH: Please check one of the	boxes that appl	y to surviving e	itity: (if applicable)				
☑ ·	This entity exists before the n are attached.	nerger and is a	domestic filing t	entity, the amendment, if	any to its public	organic record		
	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 Florida Statutes is:	that does not h department ma	ave a certificate y send any proce	of authority to transact busses served pursuant to s. 6	asiness in this sta 05,0117 and Cha	te. The apter 48,		
		· :	<del></del>			_		
		;						
\$8.605.	1: This entity agrees to pay any 1006 and 605.1061-605.1072, in the date of filing the the date of filing the the date this document is filed.	F.S	effective date of	the merger, which cannot				
<del></del> -			<del></del>			_ <del></del>		
Note:	If the date inserted in this block document's effective date on th	: c does not meet e Department o	the applicable s	tatutory filing requiremen	its, this date will	not be listed		
	NTH: Signature(s) for Each Pa	:	- isaa a rooma	•				
	of Entity/Organization:		ignature(s):		Typed or Priz Name of Indi			
923 F	foldings LLC	<u> </u>	in the second			sident of Manage		
Meta	Holdings, LLC					sident of Manage		
<del></del>								
Согрог	ations:			resident or Officer				
Florida Non-Fl	l partnerships: Limited Partnerships: orida Limited Partnerships: d Liability Companics;	Signature of Signatures o Signature of		r or authorized person ners r				
Fees:	For each Limited Liability Co. For each Limited Partnership: For each Other Business Entir		\$25.00 \$52.50 \$25.00	For each Corporation For each General Par	tnership:	\$35.00 \$25.00		