C21000180576

(Requestor's Name)
(Address)
(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:
Special histidetrons to I ming Officer.

Office Use Only



300418009693

2023 EDY - 1 FT 2: 12



Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/1/2023	_	⇔WALK	N≠
ENTITY NAME Contes	am, LLC	***************************************	
DOCUMENT NUMBER			
	PLEASE FILE THE ATTACHED AND RETURN		
XXXXXXXX	Plain Copy Certified Copy Certificate of Status	20231:01-1	
*	*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**	1 F;1 2:	•
	Certified Copy of Arts & Amendments Certificate of Good Standing	12	
	APOSTILLE' / NOTARIAL CERTIFICATION		
COUNTRY OF DESTINA NUMBER OF CERTIFICA		<u> </u>	
TOTAL OWED \$50	ACCOUNT #: 120160000072		
Please call Tina at i	the above number for any issues or concerns. Thank you so	much!	

COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT: Conteam, 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:

Erika Easter

Contact Person

eMinutes

Firm/Company

228 Park Ave S, PMB 50845

Address

New York, NY 10003-1502

City, State and Zip Code

eteam@eminutes.com

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

For further information concerning this matter, please call:

Erika Easter

., 310

820-1000

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

0231107 -1 FIT 2: 1

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:

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
Conteam, LLC	Florida	LLC
121-196516		
		
SECOND: The exact name, form/entit	y type, and jurisdiction of the <u>su</u> r	ryjving party are as follows:
Name	Jurisdiction	Form/Entity Type
Conteam, LLC	Tennessee	LLC

<u>THIRD:</u> 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>FOUR</u>	TH: Please check one of the bo	oxes that ap	ply to surviving en	tity: (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 me	erger and is	a domestic filing e	ntity, the public organ	ic record is attacl	ned.			
		ed by the merger and is a domestic limited liability limited partnership or a domestic limited p, 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 s mailing address to which the department may send any process served pursuant to s. 605.0117 and C Florida Statutes is:								
					<u></u> .	12-			
					*;	1231			
				_		- i			
		····		**		1			
ss.605. SIXTI	1: This entity agrees to pay any r 1006 and 605.1061-605.1072, F 1: If other than the date of filing ter the date this document is file	.S. g, the delaye	d effective date of	the merger, which car		5: 1			
as the	If the date inserted in this block document's effective date on the NTH: Signature(s) for Each Par	Departmen	eet the applicable s t of State's records	statutory filing require	ments, this date w	vill not be listed			
•	of Entity/Organization:	•	Signatur ((s):	1 (1	Typed or I Name of I	ndividual:			
Con	team LLC, a Florida L <u>LC</u>		Hoto		Gabriel	Conte			
	eam, LLC, a Tennessee <u>LLC</u>			th	Gabriel	Conte			
Corpor	rations:	(If no dire	ctors selected, sig	President or Officer nature of incorporato					
	l partnerships:			er or authorized person	1				
	lorida Limited Partnerships: Signatures of all general partners on-Florida Limited Partnerships: Signature of a general partner								
	d Liability Companies:		of an authorized p						
Fees:	For each Limited Liability Con	mnany:	\$25.00	For each Corpora	tion:	\$35.00			
r ccs.	For each Limited Partnership:	agang,	\$52.50	For each General	Partnership:	\$25.00			
	For each Other Business Entity	!:	\$25.00	Certified Copy (<u>optional)</u> :	\$30.00			