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(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 11/21/20	022
	WALK IN
ENTITY NAME_	INNOTRIACQUISITION LLC TILE MERGER (HIST
DOCUMENT NU	IMBER
	PLEASE FILE THE ATTACHED AND RETURN
xxxxxx	Plain Copy
	Certified Copy
	Certificate of Status
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY Certified Copy of Arts & Amendments Certified Copy of Arts & Amendments Complete File (Including Annual Reports) Certificate of Status Certificate of Status Reflecting:
	APOSTILLE' / NOTARIAL CERTIFICATION
COUNTRY OF DE	STINATION
NUMBER OF CER	TIFICATES REQUESTED
TOTAL OWED \$	50.00 ACCOUNT # 120160000072 W: \S
Please call Tin	a at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO:

Amendment Section

, Division of Corporations

SUBJECT: Innotri Acquisition LLC

Name of Surviving Party

The enclosed Certificate of Merger and fee(s) are submitted for filling.

Please return all correspondence concerning this matter to:

Robert B. Macaulay

Contact Person

Carlton Fields

Firm/Company

700 NW 1st Avenue, Ste.1200

Address

Miami, Florida 33136-4118

City, State and Zip Code

rmacaulay@carltonfields.com

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

For further information concerning this matter, please call:

Robert B. Macaulay

Name of Contact Person

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

FILED

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance SECRETARY OF STATE TALLAHASSEE, FL

FIRST: The exact name, form/entity type, and jurisdiction for each merging party are as follows: Name Jurisdiction Form/Entity Type Innotri Limited LLC Florida Limited Liability Company **SECOND:** The exact name, form/entity type, and jurisdiction of the <u>surviving</u> party are as follows: <u>Name</u> Jurisdiction Form/Entity Type Innotri Acquisition LLC Florida Limited Liability Company

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).

room	The Trease check one of the t	OXCS Hatt	apply to surviving ci	mry. (if applicable)					
☑	This entity exists before the management attached.	erger and	is a domestic filing o	ntity, the amendment, if a	iny to its publi	e organie recore			
	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 mailing address to which the department may send any process served pursuant to s. 605.0117 and Chap Florida Statutes is:								
ss.605	1: This entity agrees to pay any .1006 and 605.1061-605.1072, It other than the date of filin fter the date this document is fil	.S. g, the dela	yed effective date of	the merger, which cannot					
as the	If the date inserted in this block document's effective date on the NTH: Signature(s) for Each Page 1	e Departm			its, this date w				
Name	of Entity/Organization:		Signature(s):		Name of Individual:				
Innotri Limited LLC			Nara Peres de Aguiar		Nara Peres de Aguiar, Manager				
Inn	otri Acquisition I	LC	Nara Peres de Ag		ara Peres de A	guiar, Manager			
Corpo	rations:		an, Vice Chairman, irectors selected, sig	President or Officer					
	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:	~	re of a general parti re of an authorized p						
Fees:	For each Limited Liability Co	mpany:	\$25.00	For each Corporation	ı :	\$35.00			
	For each Limited Partnership:	•	\$52.50	For each General Par	tnership:	\$25.00			
	For each Other Business Entit	y:	\$25.00	Certified Copy (opti	<u>ional)</u> :	\$30.00			