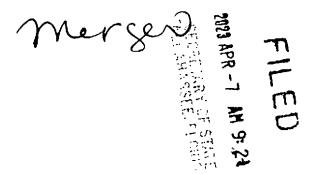
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A. RAMSEY APR 10 2023

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DATE: 04/07/23

NAME: COX CONSULTANCY, LLC

TYPE OF FILING: MERGER

COST: 50.00

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ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

Division of Corporations	
SUBJECT: COX CONSULTANCY, LLC	
Worker.	Name of Surviving Party
The enclosed Certificate of Merger and t	ee(s) are submitted for filing.
Please return all correspondence concern	ning this matter to:
JORDAN HEILMAN	
Contact Pers	Son
QUARLES & BRADY LLP	
Firm/Compa	my
411 E. WISCONSIN AVE. SUITE 2400	
Address	
MILWAUKEE, WI 53202	
City, State and Z	ip Code
JORDAN.HEILMAN@QUARLES.COM	
E-mail address: (to be used for fu	iture annual report notification)
For further information concerning this r	
JORDAN HEILMAN	at (414)277-3034
Name of Contact Person	Area Code Daytime Telephone Number
_ Certified copy (optional) \$30.00	
STREET ADDRESS:	MAILING ADDRESS:
mendment Section Amendment Section	
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

CR2E080 (2/20)

Articles of Merger For Florida Limited Liability Company

FILED

2023 APR -7 AM 9: 21

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

<u>Name</u>	Jurisdiction	Form/Entity Type
COX CONSULTANCY, LLC	NEW YORK	LLC
SECOND: The exact name, form/entity type	, and jurisdiction of the <u>sur</u>	viving party are as follows:
<u>Name</u>	Jurisdiction	Form/Entity Type
COX CONSULTANCY, LLC	FLORIDA	LLC

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

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).

FOURT	H: Please check one of the b	oxes that apply to surviving entity: (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.					
- · T	his entity is created by the me	erger and is a domestic filing entity, the public organic	c 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.					
m		hat does not have a certificate of authority to transact lepartment may send any process served pursuant to s.				
_						
SIXTH: lays after	06 and 605.1061-605.1072, If other than the date of filing the date this document is file	members with appraisal rights the amount, to which means, the delayed effective date of the merger, which cannot by the Florida Department of State:	not be prior to nor more than 90			
		e Department of State's records.				
	"H: Signature(s) for Each Pa		Typed or Printed			
	Entity/Organization: NSULTANCY, LLC	Signature(s):	Name of Individual: THOMAS J. COX			
			<u> </u>			
COX COR	NSULTANCY, LLC		THOMAS J. COX			
Corporati	ons:	Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporator.)				
•	partnerships:	Signature of a general partner or authorized person				
Non-Flor	imited Partnerships: rida Limited Partnerships: Liability Companies:	Signatures of all general partners Signature of a general partner Signature of an authorized person				

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