Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : RABIDEAU KLEIN Account Number : I20200000035 Phone : (561)655-6221

Fax Number (561)655-3221

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 GJA ADVISORY SERVICES LLC

Certificate of Status	0
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APR - 3 1914

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO:

Amendment Section

Division of Corporations

SUBJECT: GJA ADVISORY SERVICES 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:

GUY RABIDEAU

Contact Person

RABIDEAU KLEIN

Firm/Company

440 ROYAL PALM WAY, SUITE 101

Address

PALM BEACH, FL 33480

City, State and Zip Code

GRABIDEAU@RABIDEAUKLEIN.COM

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

For further information concerning this matter, please call:

GARRETT ELLIS

_{at (}561

655-6221

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.

Name

GJA ADVISORY SERVICES LLC

GJA ADVISORY SERVICES LLC

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

Name

GJA ADVISORY SERVICES LLC

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

Name

GJA ADVISORY SERVICES LLC

FLORIDA

Form/Entity Type

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).

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TOUL	CIE: Please check one of the	boxes that a	apply to surviving	entity: (if applicable)			
Ø	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 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. The mailing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 48, Florida Statutes is:						
FIFTE	I: This entity agrees to pay any 1006 and 605.1061-605.1072,	members v	with appraisal righ	ts the amount, to which n	nembers are entit	lled under	
	$\underline{\mathbf{H}}$: If other than the date of filing fter the date this document is file				not be prior to no	or more than 90	
Note:	If the date inserted in this block document's effective date on the	k does not r e Departme	neet the applicable ent of State's recor	e statutory filing requirends.	nents, this date w	rill not be listed	
SEVE	NTH: Signature(s) for Each Page	arty:			Toward on t	.	
Name of Entity/Organization:			Signature(s):		Typed or Printed Name of Individual:		
GJA ADVISORY SERVICES LLC			John John		GUY RABI	DEAU	
GJA	ADVISORY SERVICE	SLLC	My u	<u> </u>	GUY RABI	DEAU	
Corpor	rations:	Chairma	ın, Vice Chairman	President or Officer			
(If no dire			ignature of incorporator, ner or authorized person)			
Florida Non-F	n partierships: a Limited Partnerships: lorida Limited Partnerships: d Liability Companies:	Signatur Signatur	e of a general part es of all general part e of a general part e of an authorized	artners ner			
Fees:	For each Limited Liability Co	mpany:	\$ 25.00	For each Corporat	on:	\$35.00	
	For each Cimited Partnership: For each Other Business Entity:		\$52.50 \$25.00		ich General Partnership; \$25.00		