# M05000000965

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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
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(Business Entity Name)	
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Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:  26  Corp to Lla	OS FEB
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EFFECTIVE DATE 2-6-06	<i>▶</i> ''' —
Office Use Only	

M. HODGES



January 26, 2006

E.L. HRADESKY TECH-VEST, LLC 124 ST. CROIX AVE. COCOA BEACH, FL 32931

SUBJECT: TECH-VEST, LLC Ref. Number: M05000000965

We have received your document for TECH-VEST, LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Enclosed are the proper forms required to merge a Corporation into a Limited Liability Company. The form submitted is only to merge 2 Corporations together.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 706A00005684

Michelle Hodges Document Specialist

#### **COVER LETTER**

Division of Corporations	
SUBJECT: TECH-VEST L. (Name of Survivir)	=
(Name of Survivir	ig Party)
Please return all correspondence concerning this	matter to:
E.L. HRADESKY (Contact Person)	<u>.                                    </u>
,	
TECH-VETT LICA (Firm/Company)	<u> </u>
124 57 ( Ka/x AUF (Address)	
,	
(City, State and Zip Code)	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, pl	ease call:
T.L. HRASESKY at ( (Name of Contact Person)	(Area Code and Daytime Telephone Number)
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Certified Copy (optional) \$8.75	-
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314

## Articles of Merger For Florida Profit or Non-Profit Corporation

The following Articles of Merger are submitted to merge the following Florida Profit and/or Non-Profit Corporation(s) in accordance with s. 607.1109 or 617.0302, Florida Statutes.

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

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

Name

Jurisdiction

Form/Entity Type

TECH-VEST, LLC

THIRD: The attached plan of merger was approved by each domestic corporation, limited liability company, partnership and/or limited partnership that is a party to the merger in accordance with the applicable provisions of Chapters 607, 608, 617, and/or 620, Florida Statutes.

jurisdiction under which such other business entity is formed, organized or incorporated.
<u>FIFTH:</u> If other than the date of filing, the effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida
Department of State: $21009$
<u>SIXTH:</u> If the surviving party is not formed, organized or incorporated under the laws of Florida, the survivor's principal office address in its home state, country or jurisdiction is as follows:
NA-
SEVENTH: If the survivor is not formed, organized or incorporated under the laws of Florida, the survivor agrees to pay to any members with appraisal rights the amount, to which such members are entitled under ss.608.4351-608.43595, F.S.
EIGHTH: If the surviving party is an out-of-state entity not qualified to transact business in this state, the surviving entity:
a.) Lists the following street and mailing address of an office, which the Florida Department of State may use for the purposes of s. 48.181, F.S.:
Street address:
Mailing address:
W.

2 of 7

**FOURTH:** The attached plan of merger was approved by each other business entity that is a party to the merger in accordance with the applicable laws of the state, country or

b.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce obligations of each limited liability company that merged into such entity, including any appraisal rights of its members under ss.608.4351-608.43595, Florida Statutes.

**NINTH:** Signature(s) for Each Party:

Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
ETH. HRABESHY	S. I Thousand	E.L. HIENS
	<u> </u>	
Corporations:	Chairman, Vice Chairman, F	
General Partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships:	(If no directors selected, sign Signature of a general partner Signatures of all general partner Signature of a general partner	r or authorized person ners
Limited Liability Companies:	Signature of a member or au	
Fees:	\$35.00 Per Pe	urty 2
Certified Copy (optional):	\$8.75	

### PLAN OF MERGER

ame	<u>Jurisdiction</u>	*-· <u>-</u>	Form/Entity Type
TECH-VEST, INC	- Fr	<u> </u>	<u></u>
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COND: The exact name, form follows:	n/entity type, and juris	diction of	the <u>surviving</u> party are
ame	<u>Jurisdiction</u>	1	Form/Entity Type
TECH-VEST, CO	FI	; -	444
	ns of the merger are as	<del>-</del>	
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## FOURTH: A. The manner and basis of converting the interests, shares, obligations or other securities of each merged party into the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows: (Attach additional sheet if necessary) B. The manner and basis of converting the rights to acquire the interests, shares, obligations or other securities of each merged party into the rights to acquire the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:

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(Attach additional sheet if	necessary)	
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KTH: If a limited liability company is the survivo	or, the name and	business address o
ch manager or managing member is as follows:		
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