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SEIGFREID BINGHAM
A PROFESSIONAL CORPORATION

2323 Grand Boulevard, Suite 1000
Kansas City, Missouri 64108
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Tracy A. Tankard
Paralegal
816.265.4123
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December 21, 2018

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

RE: Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida – Merger, LLC

Dear Sir/Madam:

Please find enclosed for filing an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Merger, LLC, as well as our firm check in the amount of $125.00 for the filing fee. As the entity's legal name is not available in Florida, the alternate name adopted for the purpose of transacting business in Florida is "Colby Merger, LLC". Also enclosed is a Certificate of Good Standing from the entity's home state of Missouri. Upon processing, please return a file stamped copy of the filing to my attention in the self-addressed, stamped envelope provided.

Thank you for your attention to this matter. Please contact me if you have any questions.

Sincerely,

SEIGFREID BINGHAM, P.C.

By _____
Tracy A. Tankard
Paralegal

TAT
Enclosures

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Merger, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Bailie A. Schnackenberg
Name of Person

Seigfreid Bingham, P.C.
Firm/Company

2323 Grand Blvd, Suite 1000
Address

Kansas City, MO 64108
City/State and Zip Code

bailies@sb-kc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bailie A. Schnackenberg at (816) 421-4460
Name of Contact Person — Area Code — Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ $125.00 Filing Fee ☐ $130.00 Filing Fee & Certificate of Status ☐ $155.00 Filing Fee & Certified Copy ☐ $160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Merger, LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

Colby Merger, LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Missouri
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 630 W. 59th Terrace
(Street Address of Principal Office)
Kansas City, MO 64113

6. 630 W. 59th Terrace
(Mailing Address)
Kansas City, MO 64113

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: COGENCY GLOBAL INC.

Office Address: 115 North Calhoun Street, Suite 4

Tallahassee, Florida 32301
(City) (Zip code)

Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Kathy A. Bubler, Asst. Sec.
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:
Member	Shawn D. Colby
	630 W. 59th Terrace
	Kansas City, MO 64113

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Karla Kerschen Shepard

Signature of an authorized person

Karla Kerschen Shepard

Typed or printed name of signee

STATE OF MISSOURI

John R. Ashcroft
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Merger, LLC
LC001622975

was created under the laws of this State on the 19th day of December, 2018, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 20th day of December, 2018.

Secretary of State

Certification Number: CERT-12202018-0071