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(850) 656- 4724 3558 lakesore Drive Tallahassee, FL 32312

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Name:	Central Florida He	earing and Balan	ce Center, Inc.
Document #:		·	
Order #:	14984630 - 1		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
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Thank you!

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: OTO ENT Services, LLC

Name of Surviving Entity

The enclosed Articles of Merger and fee are submitted for filing.

Please return all correspondence concerning this matter to following:

Logan Thompson

Contact Person

OTO ENT Services, LLC

Firm/Company

1350 N. Orange Ave, Suite 100

Address

Winter Park, Florida 32789

City/State and Zip Code

Ithompson@entorlando.com

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

For further information concerning this matter, please call:

Logan Thompson

At (689)

232-5076

Name of Contact Person

Area Code & Daytime Telephone Number

Certified copy (optional) \$8.75 (Please send an additional copy of your document if a certified copy is requested)

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

IMPORTANT NOTICE: Pursuant to s.607.1622(8), F.S., each party to the merger must be active and current in filing its annual report through December 31 of the calendar year which this articles of merger are being submitted to the Department of State for filing.

ARTICLES OF MERGER

FILED

2023 JUN 13 PM 1: 12

The following articles of merger are submitted in accordance with the Florida Business Corporation Act pursuant to section 607.1105, Florida Statutes.

<u>FIRST:</u> The name and jurisdiction of the <u>surv</u>	riving entity:		
<u>Name</u>	<u>Jurisdiction</u>	Entity Type	Document Number (If known/ applicable)
OTO ENT Services, LLC	DE	LLC	(11 known/appneame)
SECOND: The name and jurisdiction of each	merging eligible	entity:	
<u>Name</u>	<u>Jurisdiction</u>	Entity Type	Document Number (If known/ applicable)
Central Florida Hearing and Balance Center, Inc.	FL	Corporation	H23650
		 	
		<u></u>	

<u>THIRD:</u> The merger was approved by each domestic merging corporation in accordance with s.607.1101(1)(b), F.S., and by the organic law governing the other parties to the merger.

<u>FOUR</u>	TH: Please check one of the boxes that apply to surviving entity:				
	This entity exists before the merger and is a domestic filing entity.				
	This entity exists before the merger and is not authorized to transact business in Florida.				
	This entity exists before the merger and is a domestic filing entity, and its Articles of Incorporation are being amended as attached.				
	This entity is created by the merger and is a domestic corporation, and the Articles of Incorporation are attached.				
Q	This entity is a domestic eligible entity and is not a domestic corporation and is being amended in connection with this merger as attached.				
	This entity is a domestic eligible entity being created as a result of the merger. The public organic record of the survivor 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.				
<u>FIFTH</u>	Please check one of the boxes that apply to domestic corporations:				
Ø	The plan of merger was approved by the shareholders and each separate voting group as required.				
	The plan of merger did not require approval by the shareholders.				
SIXTH	Please check box below if applicable to foreign corporations				
	The participation of the foreign corporation was duly authorized in accordance with the corporation's organic laws.				
SEVE	NTH: Please check box below if applicable to domestic or foreign non corporation(s).				
7	Participation of the domestic or foreign non corporation(s) was duly authorized in accordance with each of such eligible entity's organic law.				

. . . .

EIGHTH: If other than the date of f than 90 days after the date this docum			
Note: If the date inserted in this bloc listed as the document's effective date			g requirements, this date will not be
NINTH: Signature(s) for Each Party	<i>r</i> :		Typed or Printed
Name of Entity/Organization:		Signature(s):	Name of Individual:
OTO ENT Services, LLC		Logar Thompson	Logan Thompson
Central Florida Hearing and Balance Center, Inc.		-100% R 3080 444	John Pircon
	 		
		· · · · · · · · · · · · · · · · · · ·	
			
Corporations:	_	n, Vice Chairman, President or C vectors selected, signature of inco	
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 Limited Liability Companies: Signature of an authorized person			
Limited Liability Companies:			

EIGHTH: If other than the date of filt than 90 days after the date this docume				ot be prior to nor more	
Note: If the date inserted in this block listed as the document's effective date			ling requirement	s, this date will not be	
NINTH: Signature(s) for Each Party: Name of Entity/Organization:		Signature(s):		Typed or Printed Name of Individual:	
OTO ENT Services, LLC				Logan Thompson	
Central Florida Hearing and Balance Center, Inc.		Ada Passan		John Pircon	
Corporations: General partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships: Limited Liability Companies:	(If no dir Signatur Signatur Signatur	n, Vice Chairman, President of the control of the control of the control of a general partner or authors of all general partners of a general partner of a general partner of an authorized person	ncorporator.)		