

N060000011725

A Property Recovery + Asst.
Brokers Inc.

(Requestor's Name)

18520 NW 67th Ave. No 108

(Address)

Miami, FL 33015-3302

(Address)

(786) 285-3774

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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- Velt

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FF \$170
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04/26/07--01041--006 **35.00

04/26/07--01041--005 **38.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 APR 26 AM 11:41

PER ANDRE GRINER'S INSTRUCTIONS,
I CORRECTED THE FOLLOWING:

- names in Articles of Merger
- names on plan of merger
- swapped entities on plan/corrected
- off date
- manner + basis of converting interests
- terms + cnds. in plan of merger
- #6 + #8 / art of merger to N/A

PER ANDRE GRINER'S INSTRUCTIONS

- Velt
4/18/07

BLT

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

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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 follows:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
<u>AFFORDABLE "500" HOMES Program, "U Rent</u>		
<u>U Own Your Home," The METHOD, A</u>		
<u>Community Property Recovery & Life Recovery</u>		
<u>a for Profit (904-16526)</u>		
<u>Florida corp.</u>		

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

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
<u>A Community Property Recovery & Life Recovery, INC</u>		
<u>a Non Profit (N06-11725)</u>		
<u>Florida corp.</u>		

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.

yes.

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 jurisdiction under which such other business entity is formed, organized or incorporated.

FIFTH: 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:

SIXTH: 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:

N/A

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: _____

N/A

Mailing address: _____

N/A

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:
Afford 500 Afford Prop 11 Rent 110 ⁰⁰⁰	<i>[Signature]</i>	Andre Griner
A community Property Reg A Life	<i>[Signature]</i>	(Where) <i>[Signature]</i>

Corporations:

Chairman, Vice Chairman, President or Officer

(If no directors selected signature of incorporator.)

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 a member or authorized representative

Fees:

\$35.00 Per Party

Certified Copy (optional):

\$8.75

PLAN OF MERGER

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

Name	Jurisdiction	Form/Entity Type
AFFORDABLE "500" HOMES PROGRAM, "U RENT U OWN YOUR HOME", THE METHOD, A COMMUNITY PROPERTY RECOVERY + A LIFE RECOVERY, INC.	FLORIDA	A FLA PROFIT CORP.

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

Name	Jurisdiction	Form/Entity Type
A COMMUNITY PROPERTY RECOVERY + A LIFE RECOVERY INCORPORATED	FLORIDA	FLA. NP CORPORATION

THIRD: The terms and conditions of the merger are as follows:

In as much as All The Work done has been to help under served populations in Tallahassee & In Miami Florida The BOD was elected to Declare & meet the Fedu Responsibilities required by Florida Dept of Corporations and Florida Statutes We The Hard Working Social Workers of The State of Florida do hereby declare A Community Property Recovery / A Life Recovery Inc a Non Profit formed and focused on putting descendants of Slaves into Affordable Housing.

(Attach additional sheet if necessary)

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The merging party shall merge into the surviving party.
The merging party will succeed the interests & assets of the merging party.

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:

All Assets will be contained by
the legal entity for the
Benefit of The Desired Population.

(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:

All Assets are to be contained
by The New Legal Entity for
The Benefit of the underserved
population.

(Attach additional sheet if necessary)

FIFTH: If a partnership is the survivor, the name and business address of each general partner is as follows:

N/A

(Attach additional sheet if necessary)

SIXTH: If a limited liability company is the survivor, the name and business address of each manager or managing member is as follows:

N/A

(Attach additional sheet if necessary)

SEVENTH: Any statements that are required by the laws under which each other business entity is formed, organized, or incorporated are as follows:

N/A

(Attach additional sheet if necessary)

EIGHTH: Other provision, if any, relating to the merger are as follows:

N/A

(Attach additional sheet if necessary)