# N09000010794

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SECRETARY OF STATE

D. BRUCE

DEC 1 2009

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations	
	ge No. 26 Foundation, Inc.
Name of Survivi	ng Party
Please return all correspondence concerning this	matter to:
Francis X. J. Lynch, Esq.	
<del>+</del>	No.
Breton, Lynch, Eubanks & Suarez-Muria	is, PA A A A A A A A A A A A A A A A A A A
Firm/Company	Zi Zi
1209 North Olive Avenue	A TARA
Address	99 NOV 23 SECRETARY ALLAHASSE
West Palm Beach, FL 33401	IN 23 AM ID: 1
City, State and Zip Code	
flynch@biesmław.com	RATE 17
E-mail address: (to be used for future annual report no	otification)
For further information concerning this matter, pl	ease call:
Francis X. J. Lynch at (	561 ) 721-4004
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

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

# 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 follows:

**Jurisdiction** 

Name

<del>-</del>		_
F.O.P. Gulfstream Lodge No. 26	Florida	Corporation N09-10794
Foundation, Inc.		
Fraternal Order of Police	Florida	Limited Liability Company
Gulfstream Lodge No. 26		L09-3586
Foundation, LLC		•
<b>SECOND:</b> The exact name, form/en as follows:	tity type, and jurisdiction of	the surviving party are
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
F.O.P. Gulfstream Lodge No. 26	Florida	Corporation Corpor
Foundation, Inc.		SV S
		SEE SEE
		是 医 四
<b>THIRD:</b> The attached plan of merge limited liability company, partnership	er was approved by each don and/or limited partnership t	mestic corporation, S
merger in accordance with the applications	able provisions of Chapters	607, 608, 617, and or
620, Florida Statutes.	_	

Form/Entity Type

**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:

effective upon filing

**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			
	<del></del>	 	

**SEVENTH:** If the surviving party is an out-of-state entity, the surviving entity:

- a.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce any obligation or the rights of dissenting shareholders of each domestic corporation that is party to the merger.
- b.) Agrees to promptly pay the dissenting shareholders of each domestic corporation that is a party to the merger the amount, if any, to which they are entitled under s. 607.1302, F.S.



### **EIGHTH:** Signature(s) for Each Party:

Name of Entity/Organization:

F.O.P. Gulfstream Lodge No. 26

Fraternal Order of Police

Gulfstream Lodge No. 26

Typed or Printed Name of Individual:

Francis X. J. Lynch

Francis X. J. Lynch

Francis X. J. Lynch

Corporations:

Foundation, LLC

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

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### PLAN OF MERGER

FIRST: The exact name, form/entity follows:	type, and jurisdiction for ea	ach merging party are as		
	<u>Jurisdiction</u>	Form/Entity Type		
F.O.P. Gulfstream Lodge No. 26	Florida	Corporation		
Foundation, Inc.				
Fraternal Order of Police	Florida	Limited Liability Comp	any	
Gulfstream Lodge No. 26				
Foundation, LLC				
SECOND: The exact name, form/en as follows:	tity type, and jurisdiction of	the surviving party are		
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type		
F.O.P. Gulfstream Lodge No. 26	Florida	Corporation		
Foundation, Inc. <a href="#">FHIRD:</a> The terms and conditions o	f the merger are as follows:			
Fraternal Order of Police, Gulfstre				
with F.O.P. Gulfstream Lodge No.	26 Foundation, Inc., to be	e the surviving entity.		
F.O.P. Gulfstream Lodge No. 26 F	oundation, Inc., is a non-s	stock corporation PS	VON 60	
governed by a board of directors o	comprised of the public at	large.	VO :	
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(Attach additional sheet if necessary)

# **FOURTH:**

of the survivor, in whole or in part, into cash or other property is as follows:			
N/A		•	
		•	
		•	
	-		
(Attach additional sheet if necessary)			
(Anden additional sheet if necessary)			
B. The manner and basis of converting the rights to acquire the interests, sha			
obligations or other securities of each merged party into the <u>rights to acquire</u> shares, obligations or others securities of the survivor, in whole or in part, into other property is as follows:			
obligations or other securities of each merged party into the <u>rights to acquire</u> shares, obligations or others securities of the survivor, in whole or in part, into			
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XTH: If a limited liability compan ch manager or managing member is	ny is the survivor, the name and business address of s as follows:
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ch manager or managing member is	y is the survivor, the name and business address of s as follows:    A   C   C     A
XTH: If a limited liability companich manager or managing member is	y is the survivor, the name and business address of s as follows:    AFT   ART   ART
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