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# TRANSMITTAL LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT: Medi - Rap Dice	ed, Inc.
(Name of surviving o	corporation)
The enclosed merger and fee are submitted for fili	ng.
Please return all correspondence concerning this n	natter to the following:
Heather L. Wart	) 70
(Name of firm/company)	S JAN 3
2536 Countryside Blvd	·, Sixth MOR SEE
,	
Charwater, Florida (City/state and zip code)	33763
For further information concerning this matter, ple	ease call:
Robert Shatanuth (Name of person)	at (727) 726-6726  (Area code & daytime telephone number)
	r page for each page over 8, not to exceed a maximum of your document if a certified copy is requested)
Mailing Address: Amendment Section	Street Address: Amendment Section
Amendment Section Division of Corporations	Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

409 E. Gaines St.

Tallahassee, FL 32399



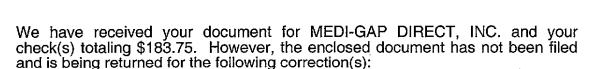
#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 8, 2005

HEATHER L. NORTH 2536 COUNTRYSIDE BLVD., SIXTH FLOOR CLEARWATER, FL 33763

SUBJECT: MEDI-GAP DIRECT, INC.

Ref. Number: P0000006234



You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan Document Specialist

Letter Number: 605A00008745



## ARTICLES OF MERGER

The following articles of merger are being submitted in accordance with section(s) 607.1109, 608.3382, and/or 620.203, Florida Statutes.

<u>FIRST:</u> The exact name, street address of its principal office, jurisdiction, and entity type for each <u>merging</u> party are as follows:

Name and Street Address	<u>Jurisdiction</u>	Entity Type
1. Amen-life and Health Services of	Selauxul	LhC
The Atlantic Coast I.L.C.		
2536 Country de BIVO, loth (L		• • • • • • • • • • • • • • • • • • •
Clearwater/PL 33763	000	
Florida Document/Registration Number: 1000000	YXX FEI Number:	39-3665453
2. Ameri-Life and Health Services of	Belaware	LLC
Pinellas County, LLC.		
7536 COUNTINGINE BIRD, LOYN FL		
Clearwater fl 33763	100	FC 211 F 1100
Florida Document/Registration Number: M000000	FEI Number:	34-3663484
3. Ameri Life and Health Services	flocida	Corporation
of Chatanouga, inc.	· · · · · · · · · · · · · · · · · · ·	
2536 Countryside Blvd, Coth FL		543599482
CHATWAter, PC 33763 Florida Document/Registration Number: P99000	Jac. 1811 -	7 201740 I
Florida Document/Registration Number: 499 (100)	アンフィック T FEI Number:_	3973847782
4. Ameri-life and Health Services	flocida	Corporation
& Knoxville, the.		
\$536 Countiyside Blid, Wh FL		
Clearwa Here PC 33763 Florida Document/Registration Number: P980000	MIZEALL	and and the
Florida Document/Registration Number: ・ ピダメ はんり	ノクンコイ FFI Number	59-3534141

(Attach additional shect(s) if necessary)

SECOND: The exact name, street address of its principal office, jurisdiction, and entity type of the surviving party are as follows:

Name and Street Address

Medi-Bap birect, Inc.

2536. Countryside Bira, 6th FC

Clarwater, CL 33763

Florida Document/Registration Number: P00000006234

FEI Number: 59-3639603

THIRD: The attached Plan of Merger meets the requirements of section(s) 607.1108, 608.438, 617.1103, and/or 620.201, Florida Statutes, and was approved by each domestic corporation, limited liability company, partnership and/or limited partnership that is a party to the merger in accordance with Chapter(s) 607, 617, 608, and/or 620, Florida Statutes.

**FOURTH:** If applicable, the attached Plan of Merger was approved by the other business entity(ies) that is/are party(ies) to the merger in accordance with the respective laws of all applicable jurisdictions.

<u>FIFTH:</u> If not incorporated, organized, or otherwise formed under the laws of the state of Florida, the surviving entity hereby appoints the Florida Secretary of State as its agent for substitute service of process pursuant to Chapter 48, Florida Statutes, in any proceeding to enforce any obligation or rights of any dissenting shareholders, partners, and/or members of each domestic corporation, partnership, limited partnership and/or limited liability company that is a party to the merger.

SIXTH: If not incorporated, organized, or otherwise formed under the laws of the state of Florida, the surviving entity agrees to pay the dissenting shareholders, partners, and/or members of each domestic corporation, partnership, limited partnership and/or limited liability company that is a party to the merger the amount, if any, to which they are entitled under section(s) 607.1302, 620.205, and/or 608.4384, Florida Statutes.

**SEVENTH:** If applicable, the surviving entity has obtained the written consent of each shareholder, member or person that as a result of the merger is now a general partner of the surviving entity pursuant to section(s) 607.1108(5), 608.4381(2), and/or 620.202(2), Florida Statutes.

**EIGHTH:** The merger is permitted under the respective laws of all applicable jurisdictions and is not prohibited by the agreement of any partnership or limited partnership or the regulations or articles of organization of any limited liability company that is a party to the merger.

ELEVENTH: SIGNATURE(S) FOR EACH PARTY:

(Note: Please see instructions for required signatures.)

Name of Entity

Signature(s)

Typed or Printed Name of Individual

Medi-Crap Direct Trace

Americally and Health

Services of the Atlantic

County of the Atlantic

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Services of the Atlantic

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TENTH: The Articles of Merger comply and were executed in accordance with the laws of each party's

**NINTH:** The merger shall become effective as of:

applicable jurisdiction.

The date the Articles of Merger are filed with Florida Department of State

(Enter specific date. NOTE: Date cannot be prior to the date of filing.)

## PLAN OF MERGER

The following plan of merger, which was adopted and approved by each party to the merger in accordance with section(s) 607.1107, 617.1103, 608.4381, and/or 620.202, is being submitted in accordance with section(s) 607.1108, 608.438, and/or 620.201, Florida Statutes.

			<del></del>	· ·	
<u>Name</u>		. /	Jurisdiction	10 Selawar	0
Amen-Life and	Health Serr	rusy the	Atlantic Cowol, L	20.	<u> </u>
Amen-life and	Health Serv	icus of Pin	rellas County.LLC	Delaware	
-Imenilite and	Health Sei	rices of Cl	ellas County, LLC hattanusga, Inc. Knoxville, Inc.	Florida	
Americ life as	rd Hallh S	rividod	Porciolla -	- FIGILITY -	
		ט יייי	MAKVITIE, ITC.	Florida	

**SECOND:** The exact name and jurisdiction of the **surviving** party are as follows:

**FIRST:** The exact name and jurisdiction of each merging party are as follows:

Jurisdiction

Medi-Gaf Direct, Inc. Florida

THIRD: The terms and conditions of the merger are as follows: See Attached medi-Gap Direct, Inc.

### PLAN OF MERGER

## ITEM 3 – Terms and Conditions of Merger

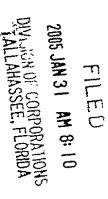
The surviving company (Medi Gap Direct, Inc.) hereby agrees to assume all liabilities of the merged entity for a period not exceed three years from the date of merger.

The surviving company will not assume any contractual relationship which would be in violation of Florida statutes.

#### ITEM 4 - Conversion

The shares of the merged corporation will be converted into equal shares of the surviving corporation. Thus one share of the merged corporation will equal one share of the surviving corporation.

No cash will be given for fractional shares.



#### **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 other securities of the survivor, in whole or in part, into cash or other property are as follows:

B. The manner and basis of converting <u>rights to acquire</u> interests, shares, obligations or other securities of each merged party into <u>rights to acquire</u> interests, shares, obligations or other securities of the surviving entity, in whole or in part, into cash or other property are as follows:



(Attach additional sheet(s) if necessary)

**<u>FIFTH:</u>** If a partnership or limited partnership is the surviving entity, the name(s) and address(es) of the general partner(s) are as follows:

If General Partner is a Non-Individual,

Name(s) and Address(es) of General Partner(s)

Florida Document/Registration Number

