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COVER LETTER

| TO: | Amendment Section |
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| | Division of Corporations |

SUBJECT: Unique Designs Professional Services, Inc.

Name of Surviving Party

The enclosed Certificate of Merger and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

City, State and Zip Code

dj@davidhardrick.com

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

For further information concerning this matter, please call:

| David Hardrick | _{at (} 407 | ₎ 463-1813 |
|------------------------|---------------------|------------------------------|
| Name of Contact Borgan | Area Cada | and Dautima Talanhana Mumbar |

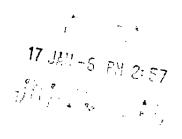
☐ Certified copy (optional) \$52.50

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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



Certificate of Merger For Florida Partnership

The following Certificate of Merger is submitted in accordance with s. 620.8918, Florida Statutes.

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

| <u>Name</u> | <u>Jurisdiction</u> | Form/Entity Type |
|---|--------------------------|--------------------------------------|
| Unique Designs Professional Services, Inc. | Florida | Corporation |
| Universal Kingdom Investment Club General Partnership | Florida | General Partnership |
| SECOND: The exact name, form/entit as follows: | y type, and jurisdiction | on of the <u>surviving</u> party are |
| Name | <u>Jurisdiction</u> | Form/Entity Type |
| Unique Designs Professional Services, Inc. | Florida | Corporation |
| THIRD: The date the merger is effection surviving party is: October 22, | • | ng laws of the |

(NOTE: If survivor is a Florida partnership, effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State. If survivor is not a Florida partnership, effective date shall be as provided in the governing law of the surviving party.)

FOURTH: The merger was approved by each party as required by its governing law.

<u>FIFTH:</u> If the surviving party is a foreign organization not qualified to transact business in this state, the street address and mailing address of an office which the Florida Department of State may use for the purposes of s. 620.8919(2), F.S., are as follows:

| Street address: | N.A. | |
|------------------|------|---|
| Mailing address: | N.A. | _ |
| | | _ |

SIXTH: Other provisions, if any, relating to the merger:

SEVENTH: Signature(s) for Each Party:

(Merger must be signed by all general partners of each partnership and by the authorized representative of each other party.)

| Name of Entity/Organization: | Signature(s): | • • | r Printed `Individual: |
|---|---------------|--------|---------------------------|
| Unique Designs Professional Services, Inc. | David Sudy | David | Hardrick |
| Universal Kingdom Investment Club General Partnership | Durcherung | Pavid | Hardrick |
| Universal Kingdom Investment Club General Partnership | networkers | Vinell | Hardrick |
| | | | |
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Fees: Filing Fees:

\$25.00 Per Party

Certified Copy: \$52.50 (Optional)
Certificate of Status: \$8.75 (Optional)

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