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. (Re	equestor's Name)	
(Ad	dress)	<u>.</u> .
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(Cit	:y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE TALLAHASSEE, FLORIDI

APPROVED AND FILED

DEPARTMENT OF STAT



FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/19/14

NAME:

EZYIELD GLOBAL, LLC

TYPE OF FILING: MERGER

COST:

78.75

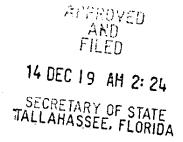
RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: EZYield Global, LLC	
Name of Surviving	Party
Please return all correspondence concerning this ma	atter to:
Contact Person	
Firm/Company	
Address	
City, State and Zip Code	
E-mail address: (to be used for future annual report notif	ication)
For further information concerning this matter, plea	se call:
at ()
Name of Contact Person Are	a Code and Daytime Telephone Number
Certified Copy (optional) \$8.75	
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



Articles of Merger For Florida Profit or Non-Profit Corporation Into Other Business Entity

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, 617.0302 or 605.1025, Florida Statutes.

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

Name	Jurisdiction	Form/Entity Type
EZ Yield.com, Inc.	Florida	Corporation
SECOND: The exact name, as follows:	form/entity type, and jurisdi	ction of the <u>surviving</u> party are
Name	Jurisdiction	Form/Entity Type
EZYield Global, LLC	Delaware	Limited liability company

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, 605, 617, and/or 620, Florida Statutes.

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.

<u>FIFTH:</u> If other than the date of filing, the effective date of the merger, which cannot be prior to no more than 90 days after the date this document is filed by the Florida Department of State:

December 31, 2014 at 11:59 p.m.

<u>SIXTH:</u> 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:

7 Times Square – 38th Floor	
New York, NY 10036	

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:	Signature(s):	Typed or Printed Name of Individual:
EZ Yield.com, Inc.	buller	David Obstler
EZYield Global, LLC	lemme	David Obstler
		

Corporations:

Chairman, Vice Chairman, President or Officer

(If no directors selected, signature of incorporator.)
Signature of a general partner or authorized person

General Partnerships:

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

	Jurisdiction	Form/Entity Type
Name EZ Yleld.com, Inc.	Florida	Corporation
SECOND: The exact name, fas follows: Name	form/entity type, and jurisdiction	on of the <u>surviving</u> party are <u>Form/Entity Type</u>
EZYield Global, LLC	Delaware	Limited liability company
shall cease, and Parent sha	all continue as the surviving	entity.
shall cease, and Parent sha	all continue as the surviving	entity.
shall cease, and Parent sha	all continue as the surviving	entity.
shall cease, and Parent sha	all continue as the surviving	entity.
shall cease, and Parent sha	all continue as the surviving	entity.
shall cease, and Parent sha	all continue as the surviving	entity.

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:
On the effective date, each then outstanding share of common stock of Merger
Sub shall be exchanged for rights to receive merger consideration in the amount
of ten (\$10.00) dollars.
(Attach additional sheet if necessary)
B. The manner and basis of converting the <u>rights to acquire</u> the interests, shares, obligations or other securities of each merged party into the <u>rights to acquire</u> the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:
N/A
(Associated to the second

(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
· W-1 - M-1
(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:
TravelCLICK, Inc., Member
7 Times Square – 38th Floor
New York, NY 10036
(Attach additional sheet if necessary)

	formed, organized, or incorporated are as follows:
N/A	
	(Attach additional sheet if necessary)
EIGHTH: Othe	r provision, if any, relating to the merger are as follows:
N/A	
	·
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