# P07000005537

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300242940323

12/20/12--01020--006 \*\*78.75



merger

'DEC 2 7 2012

T. LEWIS

#### COVER LETTER

TO: Registration Section **Division of Corporations** 

SUBJECT: Geoponics Corp.

Name of Surviving Party

Please return all correspondence concerning this matter to:

Paola Wicker

Contact Person

Geoponics Corp.

Firm/Company

3415 Radio Road, Suite 105

Address

Naples, FL 34104

City, State and Zip Code

pwicker@geoponicscorp.com

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

For further information concerning this matter, please call:

David S. Caplan

Name of Contact Person

Area Code and Daytime Telephone Number



Certified Copy (optional) \$8.75

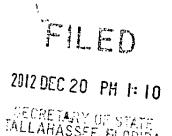
STREET ADDRESS:

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

**MAILING ADDRESS:** 

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

Please return file-stamped copy in the enclosed return envelope.



## 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

ionows.		
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
Geoponics, LLC	North Carolina	LLC
SECOND: The exact names as follows:	me, form/entity type, and jurisdic	tion of the <u>surviving</u> party are
Name	<u>Jurisdiction</u>	Form/Entity Type
Geoponics Corp	Florida	Corporation

**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.

**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 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 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:	
Geoponics Corp	M	Timothy Robin Wicker	V.P.
Geoponics, LLC	THE	Timothy Robin Wicker	Member –
			_

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**

	<u>Jurisdiction</u>	Form/Entity Type
Geoponics LLC	North Carolina	LLC
as follows:	form/entity type, and jurisdiction	- · · · ·
<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
Geoponics Corp	Florida	Corporation
with all assets of Geoponics EL	C becoming assets of Geoponics C	orp, an habilities of deoportion
LLC being assumed by Geopor	nics Corp, and the membership inte	rest of Geoponics Corp
LLC being assumed by Geopor	nics Corp, and the membership inte	rest of Geoponics Corp
	nics Corp, and the membership inte	rest of Geoponics Corp
	nics Corp, and the membership inte	rest of Geoponics Corp
	nics Corp, and the membership inte	rest of Geoponics Corp

### 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 obligations of the disappearing entity, Geoponics, LLC, are assumed by Geoponics Corp.
All membership interests of Geoponics Corp in Geoponics LLC are cancelled.
(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 - no rights exist to acquire interests, shares, obligations or other securities of Geoponics LLC.
(Attach additional sheet if necessary)

partner is as follows:	
N/A	
<del></del>	
<del></del>	
	(Attach additional sheet if necessary)
	(
	liability company is the survivor, the name and business address of
eacn manager or mana	aging member is as follows:
N/A	

	nents that are required by the laws under which each other
	d, organized, or incorporated are as follows:
None	
	······································
	(Attach additional sheet if necessary)
EIGHTH: Other provis	sion, if any, relating to the merger are as follows:
None	,, ,,
INOTIC	· · · · · · · · · · · · · · · · · · ·
	(Attach additional sheet if necessary)