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(Re	equestor's Name)	,
. (Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
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SCHELARY OF STATE

MAR 1 9 2015

C. CARROTHERS

COVER LETTER

TO:	Amendment Section Division of Corporations						
SUBJ	ECT: Federal Verification Co., Ir	nc.					
	Name of Surviving Party						
The e	nclosed Certificate of Merger and fe	e(s) are submitted	for filing.				
Please	e return all correspondence concerni	ng this matter to:					
Jim S	Sprecher						
	Contact Person						
Fede	ral Verification Co., Inc.						
	Firm/Company						
P.O.	Box 1735						
· · · · · · · · · · · · · · · · · · ·	Address						
Oldsı	mar, FL 34677						
	City, State and Zip Code						
dclev	enreich@yahoo.com						
	E-mail address: (to be used for future annu	al report notification)					
For fu	urther information concerning this m	atter, please call:					
Jim S	Sprecher	at (813	792-4600				
	Name of Contact Person	Area Code	Daytime Telephone Number				
~	Certified copy (optional) \$30.00						
STRE	EET ADDRESS:	MAILI	NG ADDRESS:				
Amendment Section			Amendment Section				
	ion of Corporations		n of Corporations				
	n Building	P. O. Bo					
	Executive Center Circle	Tallahas	ssee, FL 32314				
Tallal	nassee, FL 32301						

FILED

Articles of Merger For Florida Limited Liability Company

15 MAR 17 AM 8:58 SECRETARY OF STATE MILLAHASSEE, FLOT A

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 605.1025, Florida Statutes.

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
GSA 1000, LLC	Florida	Limited Liability Compar
	<u> </u>	
SECOND: The exact name, form/en	tity type, and jurisdiction of th	ne surviving party are as follows:
<u>Name</u>	Jurisdiction	Form/Entity Type
Federal Verification Co., Inc.	Florida	For Profit Corp.

THIRD: The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

FOUF	RTH: Please check one of the	e boxes the	at apply to survivi	ng entity: (if applical	ble)			
V	This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record are attached.							
	This entity is created by the	merger and	d is a domestic fili	ng entity, the public	organic record is	attached.		
	This entity is created by the limited liability partnership,	_			partnership or a	domestic		
	This entity is a foreign entity state. The mailing address 605.0117 and Chapter 48, F	to which t	he department may	-				
	H: This entity agrees to pay ar ss.605.1006 and 605.1061-60			ghts the amount, to	which members a	ire entitled		
	H: If other than the date of filth					or to nor		
Date	of filing							
SEVE	NTH: Signature(s) for Each	Party:						
Name	of Entity/Organization:		Signature(s):		Typed or Printed Name of Individual			
	1000, LLC		- 1 C	Spelin	Phillip Spreche			
Fede	ral Verification Co., Inc.		1/2	In-	_Jim Sprecher			
· · · · · · · · · · · · · · · · · · ·								
Corpo	rations:		n, Vice Chairman, ctors selected, signatu	President or Officer				
		e of a general part	ner or authorized per	rson				
	a Limited Partnerships:	_	es of all general pa					
	Florida Limited Partnerships: ed Liability Companies:	_	e of a general part e of an authorized					
Fees:	For each Limited Liability C	Company:	\$25.00	For each Corpora	ation:	\$35.00		
	For each Limited Partnership	p:	\$52.50	For each General	Partnership:	\$25.00		
	For each Other Business Ent	tity:	\$25.00	Certified Copy	<u>optional)</u> :	\$30.00		