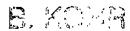
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(Re	equestor's Name)	
(Ad	dress)	
•	•	
(Address)		
(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer	

Office Use Only



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EXAMINER



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COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: TAMPA BAY DRY		
Name of Surviving Part	ý	
The enclosed Certificate of Merger and fee(s) are subm	nitted for filing.	
Please return all correspondence concerning this matter	r to:	
Chetan R. Shah		
Contact Person		
TAMPA BAY DRY CLEANER INC.		
Finn/Company		
4001 W. Henry Ave.		
Address		
Tampa, FL 33614		
City, State and Zip Code		
lafterU@aol.com		
E-mail address: (to be used for future annual report notific	ation)	
For further information concerning this matter, please of	call:	
Chetan R. Shah at (72	7) 688-6149	
Name of Contact Person Area C	Code and Daytime Telephone Number	
Certified copy (optional) \$30.00		
STREET ADDRESS: M.	AILING ADDRESS:	
•	gistration Section	
	vision of Corporations	
	O. Box 6327 Ilahassec, FL 32314	
Tallahassee, FL 32301	Hallassy G P G J2J14	

TBD



Certificate of Merger For Florida Limited Liability Company

The following Certificate of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 608.4382, Florida Statutes.

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

Name	<u>Jurisdiction</u>	Form/Entity	/ Type
ZING DRY CLEANING AND MAI	Florida	LLC	<u> -10</u> 000048
AWESOME VALUE DRY CLEAR	Florida	LLC	L090000936
			·
	10 - 10 1 - 10 1 1 1 1 1 1 1 1 1 1 1 1 1		
SECOND: The exact name, form/enas follows:	itity type, and jurisdiction of	the <u>surviving</u>	party are
Name	Jurisdiction	Form/Entity	Type
TAMPA BAY DRY CLEANER INC	Florida	Inc.	

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					
FIFTH: 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:					
09/16/2011					
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:					
SEVENTH: If the survivor is not formed, organized or incorporated under the laws of Florida, the survivor agrees to pay to any members with appraisal rights the amount, to which such members are entitles under ss.608.4351-608.43595, F.S.					
EIGHTH: If the surviving party is an out-of-state entity not qualified to transact business in this state, the surviving entity:					
a.) Lists the following street and mailing address of an office, which the Florida Department of State may use for the purposes of s. 48.181, F.S., are as follows:					
Street address:					
Mailing address:					

b.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce obligations of each limited liability company that merged into such entity, including any appraisal rights of its members under ss.608.4351-608.43595, Florida Statutes.

NINTH: Signature(s) for Each Party:

✓ Name of Individual: Name of Entity/Organization: Chetan R. Shah

Chetan R

Corporations: Chairman, Vice Chairman, President or Officer

(If no directors selected, signature of incorporator.)

Typed or Printed

General partnerships: Signature of a general partner or authorized person

Signatures of all general partners Florida Limited Partnerships: Signature of a general partner Non-Florida Limited Partnerships:

Signature of a member or authorized representative Limited Liability Companies:

Fees: For each Limited Liability Company: \$25.00 For each Corporation: \$35.00 \$52.50 For each Limited Partnership: For each General Partnership: \$25.00

For each Other Business Entity: \$25.00

Certified Copy (optional): \$30.00

PLAN OF MERGER .

w	
<u>Jurisdiction</u>	Form/Entity Type
Florida	LLC
tity type, and jurisdiction	on of the <u>surviving</u> party are Form/Entity Type
Florida	Inc.
•	iabilities of Merging Party.
litional shoot if nacconnection	-n,)
	Jurisdiction Florida f the merger are as follows:



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 outstanding shares, assets and liabilities of Merging Parties are conveyed to		
Surviving Party.		
(Attach additional sheet if necessary)		
B. The manner and basis of converting <u>rights to acquire</u> the interests, shares, obligations or other securities of each merged party into <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:		
Same as Fourth "A".		
(Attach additional sheet if necessary)		

TBD

FIFTH: Any statements that are required lentity is formed, organized, or incorporated	by the laws under which each other business lare as follows:
•	
(Attach additiona	ıl sheet if necessary)
SIXTH: Other provisions, if any, relating t	to the merger are as follows:
Chetan R. Shah, 5706 TPC Blvd., Lutz,	FL 33558
/Au_d J.Dr	I shoot if necessary)