| (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: | | | |
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Office Use Only



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04/14/16--01007--030 **43.75

04/29/16--01011--001 **35.00

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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2016

RYAN MITCHELL / TIGERSOFT, INC. 1570 SANDY SPRINGS DR FLEMING ISLAND, FL 32003 US

SUBJECT: TIGERSOFT, INC. Ref. Number: P15000093035

We have received your document for TIGERSOFT, INC. and check(s) totaling \$43.75. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$35.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

You must have a signuture for both companies even if it is the same person. Please attach a plan of merger to the articles of merger. You must have a plan of merger.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 716A00007993

COVER LETTER

| TO: | Amendment Section | | | |
|--------------|---|------------------|------------------------|----------------|
| | Division of Corporations | | | |
| SI IR II | Tigersoft, Inc. | | | |
| 301331 | Name of Surviving | Corporation | | |
| The en | closed Articles of Merger and fee are subn | nitted for filin | g. | |
| Please | return all correspondence concerning this | matter to follo | wing: | |
| Ryan M | litchell | | | |
| | Contact Person | | | |
| Tigerso | ft, Inc. | | | |
| ~ | Firm/Company | | | |
| 1570 Sa | andy Springs Dr | | | |
| | Address | | | |
| Flemin | g Island, FL 32003 | | | |
| | City/State and Zip Code | | | |
| info@ti | gersoft.net | | | |
| E- | mail address: (to be used for future annual report no | otification) | | |
| For fu | ther information concerning this matter, pl | lease call: | | |
| Ryan M | litchell | 240 At (| 479-9885 | |
| | Name of Contact Person | At (| Area Code & Daytime Te | lephone Number |



Certified copy (optional) \$8.75 (Please send an additional copy of your document if a certified copy is requested)

STREET ADDRESS:

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

MAILING ADDRESS:

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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

16 APR 29 AM 9: 19

ARTICLES OF MERGER

(Profit Corporations)

The following articles of merger are submitted in accordance with the Florida Business Corporation Act, pursuant to section 607.1105, Florida Statutes.

| First: The name and jurisdiction o | f the surviving corporation: | |
|--|--|---|
| Name | <u>Jurisdiction</u> | Document Number (If known/ applicable) |
| Tigersoft, Inc. | Florida | P15000093035 |
| Second: The name and jurisdiction | n of each merging corporation: | |
| <u>Name</u> | <u>Jurisdiction</u> | Document Number |
| Tigersoft, Inc. | Pennsylvania | (If known/ applicable) |
| | | |
| | | |
| | | |
| | | |
| | ched. effective on the date the Articles of | Merger are filed with the Florida |
| Department of State. OR 11 /12 /2015 (Enter | Section NOTE: As of classic | |
| than | n 90 days after merger file date.) es not meet the applicable statutory filing r | e cannot be prior to the date of filing or more requirements, this date will not be listed as the |
| | viving corporation - (COMPLETE Corporation - (COMPLETE Corporation) | |
| | y the board of directors of the surviv areholder approval was not required | |
| | rging corporation(s) (COMPLETE O y the shareholders of the merging co | |
| | y the board of directors of the mergi areholder approval was not required | |

(Attach additional sheets if necessary)

Seventh: SIGNATURES FOR EACH CORPORATION

| Name of Corporation | Signature of an Officer or Director | Typed or Printed Name of Individual & Title |
|---|--|---|
| Tigersoft, Inc. | R | Ryan Mitchell, President |
| Tigersoft, Inc. | R | Ryan Mitchell, President |
| | | ************************************** |
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| | *************************************** | |
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PLAN OF MERGER

16 APR 29 AM 9: 19

(Non Subsidiaries)

The following plan of merger is submitted in compliance with section 607.1101, Florida Statutes, and in accordance with the laws of any other applicable jurisdiction of incorporation.

| <u>Name</u> | <u>Jurisdiction</u> |
|---------------------------------|----------------------------------|
| Tigersoft, Inc | Florida |
| Second: The name and jurisdicti | ion of each merging corporation: |
| <u>Name</u> | <u>Jurisdiction</u> |
| Tigersoft, Inc | Florida |
| Tigersoft, Inc | Pennsylvania |
| | |
| | |
| | |
| | |

Fourth: The manner and basis of converting the shares of each corporation into shares, obligations, or other securities of the surviving corporation or any other corporation or, in whole or in part, into cash or other property and the manner and basis of converting rights to acquire shares of each corporation into rights to acquire shares, obligations, or other securities of the surviving or any other corporation or, in whole or in part, into cash or other property are as follows:

Shares of Tigersoft, Inc of Pennsylvania will be converted one for one into shares of Tigersoft, Inc of Florida.

SECRETARY OF STATE DIVISION OF CORPORATIONS

16 APR 29 AM 9: 19

Other provisions relating to the merger are as follows:

There are no other provisions relating to the merger.