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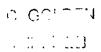


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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
LINA HEALTH INC	
SUBJECT: Name of Surviving Enti	ity
The enclosed Articles of Merger and fee are submitted	led for filing.
Please return all correspondence concerning this ma	itter to following:
Rich Benvenuto	
Contact Person	<del></del>
UNA HEALTH INC.	
Firm/Company	
8680 Lakeside Bnd	
Address	<del></del>
Parkland FL 33076	
City/State and Zip Code	<del></del>
rich@unahealth.co	<del></del>
E-mail address: (to be used for future annual report notif	ication)
For further information concerning this matter, plea	se call:
Rich Benvenuto	At (866 ) 862-4584 x 701
Name of Contact Person	Area Code & Daytime Telephone Number
Certified copy (optional) \$8.75 (Please send an a	dditional copy of your document if a certified copy is requested)
Mailing Address:	Street Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

IMPORTANT NOTICE: Pursuant to s.607.1622(8), F.S., each party to the merger must be active and current in filing its annual report through December 31 of the calendar year which this articles of merger are being submitted to the Department of State for filing.



## FLORIDA DEPARTMENT OF STATE2020 ..... - is 11 9: 11 Division of Corporations

May 21, 2020

RICH BENVENUTO 8680 LAKESIDE BEND PARKLAND, FL 33076

SUBJECT: UNA HEALTH INC. Ref. Number: P20000011633

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

The fee to file articles of merger or articles of share exchange is \$35 per party to the merger or share exchange. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

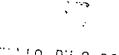
If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 320A00010285

Claretha Golden Regulatory Specialist II

www.sunbiz.org

## **ARTICLES OF MERGER**



2023."" 10 Pil 3: 29

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

<u>Name</u>	<u>Jurisdiction</u>	Entity Type	Document Number (If known/ applicable)
UNA HEALTH INC.	<u>FL</u>	Corp	P20000011633
SECOND: The name and jurisdiction of each page 1			
<u>Vame</u>	<u>Jurisdiction</u>	Entity Type	Document Number (If known/ applicable)
UNA HEALTH INC.	FL	Corp	P20000011633
	FL NEVADA	LLC	P20000011633
UNA HEALTH INC. RSQUARED VENTURES, LLC	<del></del>		P20000011633
	<del></del>		P20000011633

<u>FOUR</u>	TH: Please check one of the boxes that apply to surviving entity:
Ø	This entity exists before the merger and is a domestic filing entity.
	This entity exists before the merger and is not authorized to transact business in Florida.
	This entity exists before the merger and is a domestic filing entity, and its Articles of Incorporation are being amended as attached.
	This entity is created by the merger and is a domestic corporation, and the Articles of Incorporation are attached.
	This entity is a domestic eligible entity and is not a domestic corporation and is being amended in connection with this merger as attached.
	This entity is a domestic eligible entity being created as a result of the merger. The public organic record of the survivor is attached.
	This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.
FIFTH	: Please check one of the boxes that apply to domestic corporations:
Ø	The plan of merger was approved by the shareholders and each separate voting group as required.
	The plan of merger did not require approval by the shareholders.
<u>SIXTH</u>	E: Please check box below if applicable to foreign corporations
	The participation of the foreign corporation was duly authorized in accordance with the corporation's organic laws.
<u>SEVEI</u>	NTH: Please check box below if applicable to domestic or foreign non corporation(s).
	Participation of the domestic or foreign non corporation(s) was duly authorized in accordance with each of such eligible entity's organic law.

EIGHTH: If other than the date of fi than 90 days after the date this docum			annot be prior to nor more		
Note: If the date inserted in this block listed as the document's effective date			nents, this date will not be		
NINTH: Signature(s) for Each Party:			Typed or Printed		
Name of Entity/Organization:	Signature(s):		Name of Individual:		
UNA HEALTH INC	hill	m	Richard Benvenuto		
RSQUARED VENTURE	SLLC		Richard Benvenuto		
	2-26				
-					
Corporations:	Chairman, Vice Chairman,		)		
General partnerships:	(If no directors selected, signature of incorporator.) Signature of a general partner or authorized person				
Florida Limited Partnerships: Non-Florida Limited Partnerships:	Signatures of all general partners				
Limited Liability Companies:	Signature of a general partr Signature of an authorized				