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A. RAMSEY JUL 10.2024

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 7/9/2024

NAME: MAJESTIC LIPS INC

TYPE OF FILING: MERGER

COST: 70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

PUHA

* File Second *

COVER LETTER

Division of Corporations	
SUBJECT: MAJESTIC LIPS INC.	
Name of Surviving Entity	
The enclosed Articles of Merger and fee are submitted for	filing.
Please return all correspondence concerning this matter to	following:
JORDAN HEILMAN	
Contact Person	_
QUARLES & BRADY LLP	
Firm/Company	_
411 E. WISCONSIN AVE. SUITE 2400	
Address	_
MILWAUKEE, WI 53202	
City/State and Zip Code	
JORDAN,HEILMAN@QUARLES.COM	
E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call	
JORDAN HEILMAN At (414 277-3034
Name of Contact Person	Area Code & Daytime Telephone Number
Certified copy (optional) \$8.75 (Please send an addition	al copy of your document if a certified copy is requested)
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

ARTICLES OF MERGER FILED 2024 JUL -9 PM 5: 00 2024 JUL -9 PM 5: 00

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 Numbe (If known/applicable)
MAJESTIC LIPS INC	FLORIDA ———	CORP	(II KNOWN approxime)
SECOND: The name and jurisdic	ction of each <u>merging</u> eligible	entity:	
<u>Name</u>	<u>Jurisdiction</u>	Entity Type	Document Number (If known/applicable)
	NEW YORK	CORP	
MAJECTIC LIPS INC	NEW TORK	———	5964050
MAJECTIC LIPS INC	NEW TORK		5964050
MAJECTIC LIPS INC	NEW TORK		5964050
MAJECTIC LIPS INC	NEW TORK		5964050

THIRD: The merger was approved by each domestic merging corporation in accordance with s.607.1101(1)(b), F.S., and by the organic law governing the other parties to the merger.

FOURTH: Please check one of the boxes that apply to surviving entity:

- XI 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.

<u>FIFTH:</u> Please check one of the boxes that apply to domestic corporations:

- ×I 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.

SIXTH: Please check box below if applicable to foreign corporations

*I The participation of the foreign corporation was duly authorized in accordance with the corporation's organic laws.

SEVENTH: 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.

	iling, the delayed effective date of the merger, which nent is filed by the Florida Department of State:	cannot be prior to nor more	
	k does not meet the applicable statutory filing require e on the Department of State's records.	ements, this date will not be	
NINTH: Signature(s) for Each Party	:	Typed or Printed	
Name of Entity/Organization:	Signature(s):	Name of Individual:	
MAJESTIC LIPS INC	Rosem Dison	Roseann DiBona	
MAJESTIC LIPS INC	Roseam Disora	Roseann DiBona	
		·	
- .			
Corporations:	Chairman, Vice Chairman, President or Officer	ur)	
General partnerships:	(If no directors selected, signature of incorporator.) 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 an authorized person		