## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BILZIN SUMBERG BAENA PRICE & AXEL

Account Number : 075350000132

: (305)374-7580

Phone

: (305)351-2122

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:

## MERGER OR SHARE EXCHANGE

Micon Packaging, Inc.

Certificate of Status	1
Certified Copy	1
Page Count	06
Estimated Charge	\$77.50

merger projecus

FEB 1 1 2013

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Corporate Filing Menu

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T. LEWIS

FAX:3053747593

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2013 FEB | PH 4: 17

SECRETARY OF STATE
PALLAHASSEE, FLORIDA

Certificate of Merger
For
Florida Limited Liability Company

The following Certificate of Merge Liability Company(ies) in accordan		merge the following Florida Limited 382, Florida Statutes.
	ity type, and jur VN990 <u>Jurisdiction</u>	isdiction for each <u>merging</u> party are as
Name W3	Jurisdiction	Form/Entity Type
Micon Realty FL, LLC	CFlorida	Limited Liability Company
A 13		jurisdiction of the surviving party are
Name PATTO	<u>Jurisdiction</u>	Form/Entity Type
Name Packaging, Inc.	. Florida	Corporation

**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.

## FEB-11-2013 MON 03:14 PM BILZIN SUMBERG

**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.

<u>FIFTH:</u> 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:

Not applicable.	<del>-</del>
SIXTH: If the surviving party is not formed, organized or inc Florida, the survivor's principal office address in its home state as follows:	
Not applicable.	
	,.
SEVENTH: If the survivor is not formed, organized or incorproved, the survivor agrees to pay to any members with appraisable such members are entitles under ss.608.4351-608.43595	sal rights the amount, to
EIGHTH: If the surviving party is an out-of-state entity not quasiness in this state, the surviving entity:	ualified to transact
a.) Lists the following street and mailing address of an office, v Department of State may use for the purposes of s. 48.181, F.S	
Street address:	
Action 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 Entity/Organization:

Signaturo(s)

Typed or Printed Name of Individual:

Micon Packaging, Inc.

Micon Realty FL, LLC

Corporations:

Chairman, Vice Chairman, President or Officer

(If no directors selected, signature of incorporator.)

General partnerships:

Signature of a general partner or authorized person Signatures of all general partners

Florida Limited Partnerships: Non-Florida Limited Partnerships:

Signature of a general partner

Limited Liability Companies:

Signature of a member or authorized representative

Fees: For each Limited Liability Company:

\$25.00

For each Corporation:

\$35.00

For each Limited Partnership: For each General Partnership:

\$52.50 \$25.00

For each Other Business Entity:

\$25.00

Certified Copy (optional):

\$30.00

## PLAN OF MERGER

FIRST: The exact name, form/entity	type, and jurisdiction f	or each <u>merging</u> party are as
follows:	Jurisdiction	Form/Entity Type
Micon Realty FL, LLC	Florida	Limited liability company
SECOND: The exact name, form/en as follows:	tity type, and jurisdictic	on of the surviving party are
Name	Jurisdiction	Form/Entity Type
Micon Packaging, Inc.	Florida	Corporation
THIRD: The terms and conditions o	f the merger are as follo	ws:
The Merger shall beco	me effective u	pon the
filing of Articles of Mer	ger with the D	epartment of
State of the State of Fl	orida.	,
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•	- A	,,,
(Attach add	itional sheet if necessor	ν)

FOURTH:

A. The manner and basis of converting the interests, shares, obligations or escurities of each merged party into the interests, shares, obligations or other of the survivor, in whole or in part, into cash or other property is as follows:	rs securities
Interests in Micon Realty FL, LLC will be cand	celed.
	<del></del>
(Attach additional sheet if necessary)	
B. The manner and basis of converting <u>rights to acquire</u> the interests, shares or other securities of each merged party into <u>rights to acquire</u> the interests, sobligations or others securities of the survivor, in whole or in part, into cash property is as follows:	hares,
The interests in Micon Realty FL, LLC will be ca	anceled.
	4 A. <del></del>
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(Attach additional sheet if necessary)	······································

FIFTH: Any stateme	nts that are required by the laws under which each ouzed, or incorporated are as follows:	ther business
Not applicabl		
11010		
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		<del></del>
		· · · · · · · · · · · · · · · · · · ·
	(Attach additional sheet if necessary)	
SIXTH: Other provis	ions, if any, relating to the merger are as follows:	
None.		
	A 111	
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·		
·		
		_
	(Attach additional sheet if necessary)	···