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To:

Division of Corporations

Fax Number

: (950)617-6380

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067

Phone : (845) 425-0077 Fax Number : (845) 818-3588

\*\*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

## Bonne Sante Natural Manufacturing, Inc.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 1       |
| Page Count            | 04      |
| Estimated Charge      | \$78.75 |

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## ARTICLES OF MERGER

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>                                 | Jurisdiction            | Entity Type             | Document Number (If known/applicable)               |
|---|-------------------------|-------------------------|---|
| Bonne Sante Natural Manufacturing, Inc.     | Florida                 | Corporation             | P98000023511  |
| SECOND: The name and jurisdiction of each i | merging eligible        | entity:                 |   |
|   |                         |                         |   |
| <u>Name</u>                                 | Jurisdiction            | Entity Type             | Document Number                                     |
| Name MILLENIUM NATURAL HEALTH PRODUCTS INC  | Jurisdiction<br>Florida | Entity Type Corporation | Document Number (If known' applicable) P02000012959 |
|   |                         |                         | (If known/applicable) P02000012959                  |
|   |                         |                         | (If known/applicable) P02000012959                  |
|   |                         |                         | (If known' applicable) P02000012959                 |

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.

To: 18506176380 · Page: 3 of 4 2020-11-24 14:50:22 GMT 18886118813 From: Vcorp Services, LLC

| FOUR  | Please check one of the boxes that apply to surviving entity:   |
|-------|---|
| ☑     | 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.   |
| Q     | 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. |
| FIFTI | 1: Please check one of the boxes that apply to domestic corporations;   |
|       | The plan of merger was approved by the shareholders and each separate voting group as required.   |
| Ø     | The plan of merger did not require approval by the shareholders.  |
| SIXTE | 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.   |
| SEVE  | VTII: 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.  |

General partnerships:

Florida Limited Partnerships:

Limited Liability Companies:

Non-Florida Limited Partnerships:

EIGHTH: If other than the date of filing, the delayed 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: Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. **NINTH:** Signature(s) for Each Party: Typed or Printed Name of Entity/Organization: Signature(s): Name of Individual: MILLENIUM NATURAL HEALTH PRODUCTS INC Alfonso J. Cervantes BONNE SANTE NATURAL MANUFACTURING INC Alfonso J. Cervantes Corporations: Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporator.)

Signature of a general partner or authorized person

Signatures of all general partners

Signature of an authorized person

Signature of a general partner