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merger

DEC 2 7 2012

T. LEWIS

W.

COVER LETTER

ntal Group, P.A.
rviving Party
s) are submitted for filing.
this matter to:
950
up.com
report notification)
ter, please call:
at (813) 261-3890
Area Code and Daytime Telephone Number
MAILING ADDRESS:
Amendment Section
Division of Corporations
P. O. Box 6327 Tallahassee, FL 32314

FILED

2012 DEC 19 PH 4:57

SECRETARY OF STATE
TALLAHASSEE FLODIS.

Certificate of Merger For Florida Limited Liability Company

The following Certificate of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 608.4382, Florida Statutes.

FIRST: The exact name, form/entity type, and jurisdiction for each <u>merging</u> party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
Plantation Dental & Sedation Group, LLC	Florida	LLC
Lighthouse Point Dental Group, P.A.	Florida	corporation
Sunset Lakes Dental Group, LLC	Florida	LLC
SECOND: The exact name, form/en	tity type, and jurisdiction of	the surviving party are
as follows:		,
Name	Jurisdiction	Form/Entity Type
Lighthouse Point Dental Group, P.A.	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.

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:
date of filing
<u>SIXTH:</u> If the surviving party is not formed, organized or incorporated under the laws of Florida, the survivor's principal office address in its home state, country or jurisdiction is as follows:
n/a
SEVENTH: If the survivor is not formed, organized or incorporated under the laws of Florida, the survivor agrees to pay to any members with appraisal rights the amount, to which such members are entitles under ss.608.4351-608.43595, F.S.
EIGHTH: If the surviving party is an out-of-state entity not qualified to transact business in this state, the surviving entity:
a.) Lists the following street and mailing address of an office, which the Florida Department of State may use for the purposes of s. 48.181, F.S., are as follows:
Street address: n/a
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:	Signature(s):	Typed or Printed Name of Individual:
Plantation Dental & Sedation Group, LLC	HAN	Laurence E. Fendrich
Lighthouse Point Dental Group, P.A.	PAM	Laurence E. Fendrich
Sunset Lakes Dental Group, LLC	MAD	Laurence E. Fendrich

Corporations: Chairman, Vice Chairman, President or Officer

(If no directors selected, signature of incorporator.)

General partnerships: 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 a member or authorized representative

Fees:For each Limited Liability Company:\$25.00For each Corporation:\$35.00For each Limited Partnership:\$52.50For each General Partnership:\$25.00For each Other Business Entity:\$25.00

Certified Copy (optional): \$30.00

PLAN OF MERGER

FIRST: The exact name, form/entity follows:	type, and jurisdiction f	or each merging party are as
Name	<u>Jurisdiction</u>	Form/Entity Type
Plantation Dental & Sedation Group, LLC	Florida	LLC
Lighthouse Point Dental Group, P.A.	Florida	corporation
Sunset Lakes Dental Group, LLC	Florida	LLC
SECOND: The exact name, form/en as follows:	tity type, and jurisdiction	on of the <u>surviving</u> party are
Name	Jurisdiction	Form/Emity Type
Lighthouse Point Dental Group, P.A.	Florida	corporation
THIRD: The terms and conditions of Plantation Dental & Sedation Growill transfer all their assets in	oup, LLC and Sunset	Lakes Dental Group, LLC
subject to all existing obligation		
to Lighthouse Point Dental Grou		
in the LLCs and leaving all	existing stock iss	sued and outstanding
in the corporation		
(Attach ade	ditional sheet if necessa	777

FOURTH:
A. The manner and basis of converting the interests, shares, obligations or other securities of each merged party into the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows: Membership interests in the limited liability companies will be cancelled.
and the sole stockholder of the corporation will remain as the on
stockholder in the surviving entity.
(Attach additional sheet if necessary)
B. The manner and basis of converting <u>rights to acquire</u> the interests, shares, obligation or other securities of each merged party into <u>rights to acquire</u> the interests, shares, obligations or others securities of the survivor, in whole or in part, into cash or other property is as follows:
There are no outstanding rights to acquire interests, shares, obligations or other
securities in the merged parties.

(Attach additional sheet if necessary)

<u>IFTH:</u> Any sta	itements that are required by the laws under which each other business organized, or incorporated are as follows:
ning is formed. n/a	organized, or meorporated are as ronows.
1/d	
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	(Attach additional sheet if necessary)
IXTH: Other p n/a	provisions, if any, relating to the merger are as follows:
· · · · · · · · · · · · · · · · · · ·	
	(Attach additional sheet if necessary)