OBE MERGER-1 (REV 11/2023)

State of California Secretary of State



OBE MERG

Certificate of Merger

(California Corporations Code sections 1113(g), 3203(g), 6019.1, 8019.1, 9640, 12540.1, 15911.14, 16915(b) and 17710.14)

For Office Use Only

-FILED-

2023 California Secretary of State

File No.: BA20242076879 Date Filed: 11/20/2024

Filing Fee: \$150.00; Certification Fee (Optional): \$5.00			This Space For Filing Use Only			
NAME OF SURVIVING ENTITY STRAT AMERICAS, LLC	2. TYPE OF ENTITY LLC	· ·	ETARY OF STATE		4. JURISDIC	
STRAT AFIERIONS, LEG			2024645162	81		^!
5. NAME OF DISAPPEARING ENTITY	6. TYPE OF ENTITY	7. CA SECR	ETARY OF STATE	ENTITY NUMBER	8. JURISDIC	
STRAT AMERICAS, LLC	LLC				F	L
8. THE PRINCIPAL TERMS OF THE AGREEMENT OF MERGER WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. (IF A VOTE WAS REQUIRED, SPECIFY THE CLASS AND THE NUMBER OF OUTSTANDING INTERESTS OF EACH CLASS ENTITLED TO VOTE ON THE MERGER AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS. ATTACH ADDITIONAL PAGES, IF NEEDED.)						
SURVIVING ENTITY			DISAPPEARING ENTITY			
			S AND NUMBER AND PERCENTAGE VOTE REQUI			
INTEREST			REST		50%	
10. IF EQUITY SECURITIES OF A PARENT PARTY ARE TO BE ISSUED IN THE MERGER, CHECK THE APPLICABLE STATEMENT.						
No vote of the shareholders of the parent party was required. The required vote of the shareholders of the parent party was obtained.						
11. IF THE SURVIVING ENTITY IS A DOMESTIC LIMITED LIABLITY COMPANY, LIMITED PARTNERSHIP, OR PARTNERSHIP, PROVIDE THE REQUISITE CHANGES (IF ANY) TO THE INFORMATION SET FORTH IN THE SURVIVING ENTITY'S ARTICLES OF ORGANIZATION, CERTIFICATE OF LIMITED PARTNERSHIP OR STATEMENT OF PARTNERSHIP AUTHORITY RESULTING FROM THE MERGER. ATTACH ADDITIONAL PAGES, IF NECESSARY.						
12. IF A DISAPPEARING ENTITY IS A DOMESTIC LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP, OR PARTNERSHIP, AND THE SURVIVING ENTITY IS NOT						
A DOMESTIC ENTITY OF THE SAME TYPE, ENTER THE PRINCIPAL PLACE OF BUSINESS OF THE SURVIVING ENTITY.						
PRINCIPAL PLACE OF BUSINESS OF SURVIVING ENTITY CITY AND STATE ZIP CODE						DDE
43. OTHER INFORMATION REQUIRED TO BE STATED IN THE CERTIFICATE OF MERGER BY THE LAWS UNDER WHICH EACH CONSTITUENT OTHER BUSINESS ENTITY IS ORGANIZED. ATTACH ADDITIONAL PAGES, IF NECESSARY.						
14. STATUTORY OR OTHER BASIS UNDER WHICH A FOREIGN OTHER BUSINESS ENTITY IS A THE MERGER.			S AUTHORIZED TO EFFECT 15. FUTURE EFFECTIVE DATE, IF ANY			
FLORIDA REVISED LIMITED LIABILITY COMPANY ACT CODE SECTIONS 605.102		5.1021-1026		(Month)	(Day)	(Year)
16. ADDITIONAL INFORMATION SET FORTH ON ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE PART OF THIS CERTIFICATE.						
17. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.						
11 14/24 SETH SCHACHNER, MANAGER SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVING ENTITY DATE TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON					<u></u>	
SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVIA	AG ENTITY DATE	E TIPEOR	FRINT NAME AND	TITLE OF AUTHOR	(IZED PERSO)	٧
SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVI	NG ENTITY DAT	E TYPE OR	PRINT NAME AND	TITLE OF AUTHOR	ZED PERSON	N
11/14/24		/24 _{SETH S}	SETH SCHACHNER, MANAGER			
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY DATE			TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON			
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPE	ARING ENTITY DAT	E TUBE OF	ODINET NIVERE AND	TITLE OF ALITHON	IZCD DEDGA	
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY DATE TYPE OF PRINT NAME AND TITLE OF AUTHORIZED PERSON For an entity that is a business trust, real estate investment trust or an unincorporated						
association, set forth the provision of law or other basis for the authority of the person signing:						