1. SURVIVING ENTITY NAME:

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

## STATEMENT OF MERGER

Read the Instructions M075i

Grateful Media, LLC

	JRVIVING ENTITY JURIS	
1.2 SU	RVIVING ENTITY TYPE -	- check only one and follow instructions:
	Arizona corporation or I this Statement Articles of	LLC already in existence in A.C.C. records – if applicable, attach to Amendment.
	Statement the Articles of I partnership document that	on, LLC, or limited partnership (LP, LLP, LLLP) – attach to this incorporation (corporations), Articles of Organization (LLCs), or limite it is required to be filed with the Secretary of State's office.  Perships must also file with the Arizona Secretary of State.
	Foreign corporation or I	LLC already registered with the A.C.C.
	Foreign corporation or I the Application for Authori	LLC seeking registration with the A.C.C attach to this Statement (ty (corporations) or Foreign Registration Statement (LLCs).
凹	Foreign corporation, LLC the A.C.C.	C, or other entity that is not, and will not, be registered with
2. MERGING I than the sur this Stateme	rviving entity. If more space	entity type, and jurisdiction of organization of all merging entities oth the is required, list all information on a separate sheet and attach it to
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3.	SURVIVING ENTITY - KNOWN PLACE OF BUSINESS OR PRINCIPAL ADDRESS - Complete this
	section only if the surviving entity is either: an Arizona corporation, LLC, or limited partnership; or a foreign corporation or LLC already registered with the A.C.C. NOTE: for corporations and LLCs already
	on file with the A.C.C. the address must match the address currently shown in A.C.C. records.

Attention (optional)		
Address 1		
Address 2 (optional)		
City	State or	Zip
Country	Province	

4. SURVIVING ENTITY – STATUTORY AGENT – Complete this section only if the surviving entity is either: an Arizona corporation, LLC, or limited partnership; or a foreign corporation or LLC already registered with the A.C.C.:

4.1		tity) and	physical or street	4.2	of statutory a NOTE: if survi address is red	gent (can be a P iving entity is an	.O. Box):
Statutory Agen	it Name (required)						
Attention (option	onal)	7.77		Attention (opt	ional)		
Address 1				Address 1			
Address 2 (opt	ional)	AZ State	Zip	Address 2 (op	tional)	AZ State	Zip

5. FOREIGN SURVIVING ENTITY, NOT QUALIFIED IN ARIZONA – MAILING ADDRESS (foreign entities that are not and will not be qualified to transact business or conduct affairs in Arizona must provide a mailing address to which service of process may be mailed):

Grateful Media, LLC		
Attention (optional) 7950 Jones Branch Drive		
Address 1	The second	
Address 2 (optional)		
McLean	VA	22107-0150
Country	State or Province	Zip

APPROVAL OF MERGER – (applies to all of the merging entities, including the surviving entity if it is also a merging entity):

By the signatures appearing on this Statement of Merger, each entity declares under the penalty of perjury that the plan of merger was approved by each merging entity, and by the surviving entity if it is also a merging entity, in accordance with A.R.S. § 29-2203, and also by each foreign merging entity or foreign merging and surviving entity in accordance with the laws of its jurisdiction of organization.

7.	<b>DELAYED EFFECTIVE DATE</b> – Complete this section only if the merger will have a <i>delayed</i> effective
	date of not more than 90 days after delivery of the Statement to the A.C.C list that date below:

## SIGNATURES: Each merging entity must sign.

The surviving entity must sign if it is also a merging entity.

If more space is needed, attach a separate sheet with all pertinent information.

Each signer of this Statement declares and certifies under penalty of perjury that this Statement together with any attachments is submitted in compliance with Arizona law.

Entity Name:	
GRATEFUL VENTURES LLC	
Signature: 4 4 00 (N	Date:
Signature: Courts COOL	12/4/19
Print name and title of person signing:	
Elizabeth A. Allen, Authorized Individual	
Entity Name:	
Signature:	Date:
Print name and title of person signing:	
Entity Name:	
Signature:	Date:
Print name and title of person signing:	
Entity Name:	
Signature:	
Print name and title of person signing:	
Entity Name:	
Signature:	
Print name and title of person signing:	
Entity Name:	
Signature:	
Print name and title of person signing:	

			_
Filing Fee: \$100.00 (corporations) \$50 (LLCs)	Mail:	Arizona Corporation Commission - Examination Section	
Expedited processing – add \$35.00 to filing fee.		1300 W. Washington St., Phoenix, Arizona 85007	
All fees are nonrefundable - see Instructions.	Fax:	602-542-4100	

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are **public record** and are open for public inspection.

If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

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3 PAGES

Clear Form

**Print Form** 

ARIZONA CORP COMMISSION
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## **COVER SHEET**

**USE A SEPARATE COVER SHEET FOR EACH DOCUMENT** \*\* ORDER COPIES USING A RECORDS REQUEST FORM \*\*

New Entity			
	Change to existing en	itity Re-submission	of rejected filing
NTITY NAM	E - give the exact name of th	ne corporation as current	ly shown in A.C.C. records:
SRATEFUL VE	NTURES, LLC		
	PROCESSING?	□NO - pay only t	the filing fee
	35 to the filing fee		
	azcc.gov, under the FAQs.	om of each form or on ti	ne fee schedule on our website,
AYMENT:	4FE0	Amount to deduct: \$85.0	•
	ount #: 1559  Anail cash. Cash may be used only for		
abbreviations. Coinclude: no important pandwritten or s	thecks must be completely and prop	perly filled out, including the an ess of the account holder; no li k numbers: temporary checks	mission," with all words spelled out and no nount sections. UNACCEPTABLE CHECKS mprinted or preprinted check number; (new accounts).
online certificate	es of good standing. We accept only	is, and for offine corporation	innual reports, online name reservations, or
	S OI GOOD Stallelling The Goodbe Still	Visa, MasterCard, and Americ	an Express.
REQUIRED -	RETURN DELIVERY OPTIC		an Express.
REQUIRED -		ON ( <u>PLEASE PRINT CLEA</u>	an Express.
	RETURN DELIVERY OPTIC	ON ( <u>PLEASE PRINT CLEA</u>	an Express.
☑ Email	RETURN DELIVERY OPTIO	ON ( <u>PLEASE PRINT CLEA</u>	RLY and select only ONE):
☑ Email ☐ Pick up	RETURN DELIVERY OPTION  Email address: Corporatedept@a	ON ( <u>PLEASE PRINT CLEA</u>	RLY and select only ONE):
☑ Email ☐ Pick up	RETURN DELIVERY OPTICE  Email address: Corporatedept@a  Name:  Name:	ON ( <u>PLEASE PRINT CLEA</u>	RLY and select only ONE):
☑ Email ☐ Pick up	RETURN DELIVERY OPTICE  Email address: Corporatedept@a  Name:  Name:  Address:	ON (PLEASE PRINT CLEA	RLY and select only ONE):  Phone: 602-249-3466 Tiffany Nagy
Email Pick up Mail	RETURN DELIVERY OPTIC  Email address: Corporatedept@a  Name:  Name:  Address:  City:  Phone:	ON (PLEASE PRINT CLEA accusearch.biz	Phone: 602-249-3466 Tiffany Nagy
Email Pick up Mail	RETURN DELIVERY OPTIC  Email address: Corporatedept@a  Name:  Name:  Address:  City:  Phone:  WILL BE MAILED IF THEY ARE N	ON (PLEASE PRINT CLEA accusearch.biz	Phone: 602-249-3466 Tiffany Nagy  Zip:
Email Pick up Mail	RETURN DELIVERY OPTIC  Email address: Corporatedept@a  Name:  Address:  City:  Phone:  WILL BE MAILED IF THEY ARE N  FOR ARIZONA CO	ON (PLEASE PRINT CLEA accusearch.biz State:	Phone: 602-249-3466 Tiffany Nagy  Zip:

View current processing times at: www.azcc.gov/Divisions/Corporations/document-processing-times.pdf

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