

**Delaware Division of Corporations
401 Federal Street – Suite 4
Dover, DE. 19901
Phone: (302) 739-3073
Fax: (302) 739-3812**

Certificate of Merger

Dear Sir or Madam:

Attached please find a Certificate of Merger form to be filed in accordance with the Limited Partnership Act of the State of Delaware. The fee to file the Certificate is \$200.00. You will receive a stamped "Filed" copy of your submitted document. A certified copy may be requested for an additional \$50. Expedited services are available. Please contact our office concerning these fees.

Contact our Franchise Tax Section concerning taxes due on any Delaware companies merging out of existence. A check for the tax payment and the filing/assessment fee must accompany the Certificate for filing. Please make your check payable to the "Delaware Secretary of State".

For the convenience of processing your order in a timely manner, please include a cover letter with your name, address and telephone/fax number to enable us to contact you if necessary. Please make sure you thoroughly complete all information requested on this form. It is important that the execution be legible, we request that you print or type your name under the signature line.

Thank you for choosing Delaware as your corporate home. Should you require further assistance in this or any other matter, please don't hesitate to call us at (302) 739-3073.

Sincerely,

Department of State
Division of Corporations

encl.
rev. 07/04

**STATE OF DELAWARE
CERTIFICATE OF MERGER OF
DOMESTIC LIMITED PARTNERSHIPS**

Pursuant to Title 6, Section 17-211 of the Delaware Limited Partnership Act, the undersigned limited partnership executed the following Certificate of Merger:

FIRST: The name of the surviving limited partnership is

_____,
and the name of the limited partnership being merged into this surviving limited partnership is _____.

SECOND: The Agreement of Merger has been approved, adopted, certified, executed and acknowledged by each of the constituent limited partnerships.

THIRD: The name of the surviving limited partnership is

_____.

FOURTH: The merger is to become effective on _____.

FIFTH: The Agreement of Merger is on file at

_____,
the place of business of the surviving limited partnership.

SIXTH: A copy of the Agreement of Merger will be furnished by the surviving limited partnership on request, without cost, to any partner of the constituent limited partnership.

IN WITNESS WHEREOF, said surviving limited partnership has caused this certificate to be signed by the general partner(s), the _____ day of _____, A.D., _____.

By: _____
General Partner(s)

Name: _____
Print or Type

Title: _____