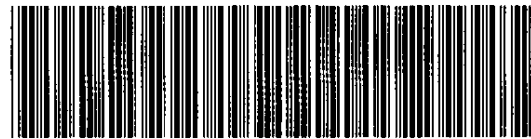


L10000017218



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08/05/10--01010--011 **25.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

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(Document Number)

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J. BRYAN

AUG - 6 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GRAPE INTERNATIONAL LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gregory Marc Scerb
Name of Person

GRAPE INTERNATIONAL LLC
Firm/Company

Address

City/State and Zip Code

charlene@jaacpa.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Charlene Deal at (954) 764-0404
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GRAPE INTERNATIONAL LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/15/2010 and assigned
Florida document number L10000017218

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

City

Zip Code

New Registered Agent's Signature, If changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Jose Alberto Marquez Zavala	ALBORADA #411, COL. PARQUES DEL PEDREGAL DEL TLALPAN, CP 14010 MEXICO	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Julio Alberto Tapia Vázquez 10% owner	ALBORADA #411, COL. PARQUES DEL PEDREGAL DEL TLALPAN, CP 14010 MEXICO	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Carlos Javier Mondragon de la Garza 10% owner	ALBORADA #411, COL. PARQUES DEL PEDREGAL DEL TLALPAN, CP 14010 MEXICO	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D: If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Gregory Marc Scerb from 25.00% owner to 20%
 Juan Girard Buylla from 18.75% owner to 20%
 Olga Lysette Diaz Mucharras from 18.75% owner to 20%
 Arturo Tonatliuh Camargo Lopez from 18.75% owner to 20%
 Jose Alberto Marquez Zavala REMOVE completely - to 0% owner

Dated July 23, 2010

X _____
 Signature of a member or authorized representative of a member

Gregory Marc Scerb
 Typed or printed name of signee

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA