

L11000039352
(H11000287161)

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H11000287161 3)))



H110002871613ABC

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : N & G ENTERPRISES GROUP CORP.
Account Number : 120110000078
Phone : (305) 222-1960
Fax Number : (800) 764-6042

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

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11 DEC -7 PM 5:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 DEC -7 AM 9:51

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GRAN SAVANA SEASON LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$25.00

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Corporate Filing Menu

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B. BOSTICK

DEC - 8 2011

EXAMINER

COVER LETTER

(H110002871613)

TO: Registration Section
Division of Corporations

SUBJECT: GRAN SAVANA SEASON 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:

Marilyn Alonso

Name of Person

MG MERCHANT SERVICES

Firm/Company

4021 SW 96 AVE

Address

MIAMI, FLORIDA 33165

City/State and Zip Code

CONTACT@MGMERCHANTSERVICES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NATALIE PEREZ

Name of Person

at 305

222-1960

Area Code & Daytime Telephone Number

STATE OF FLORIDA
TALLAHASSEE

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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

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(H110002871613)

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GRAND SAVANA SEASON LLC

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

The Articles of Organization for this Limited Liability Company were filed on 04/1/2011 and assigned
Florida document number L11000039352

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)

FILED
11 DEC -7 AM 9:51
TALLAHASSEE, FLORIDA
STATE

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

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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

Title	Name	Address	Type of Action
MGR	ELSA HERNANDEZ	1148 SW 27 AVE MIAMI, FL 33135	<input type="checkbox"/> Add <input checked="" 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
			<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.)

STATE OF FLORIDA
TALLAHASSEE

11 DEC -7 AM 9:52

FILED

Dated December 7, 2011.

Elsa Hernandez

Signature of a member or authorized representative of a member

Elsa Hernandez

Typed or printed name of signee

(H110002871613)