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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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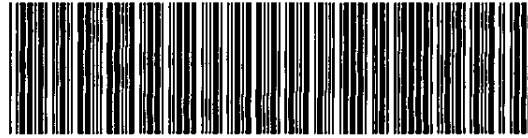
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OCT 13 2011

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SECRETARY OF STATE
TALLAHASSEE FLORIDA
2011 OCT 11 AM 10:42

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GRG BAU KFT LLC.
Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

YVETTE RASHID

Name of Person

UNIVERSAL ACCOUNTING

Firm/Company

2787 E OAKLAND PARK BLVD STE 204

Address

FORT LAUDERDALE, FL 33306

City/State and Zip Code

UNIVERSALACCT@MSN.COM

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

For further information concerning this matter, please call:

YVETTE RASHID

Name of Person

at (954)

728-8982

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

2011 OCT 11 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
GRG BAU KFT LLC.

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
CORRECTION ON ARTICLE V. ADD ADDITIONAL MBR (MGRM)

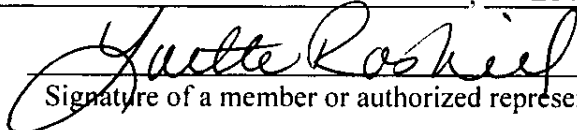
LAST NAME: MOLNAR FIRST NAME: LASZLO

OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

FILED
2011 OCT 11 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated: OCTOBER 4, 2011



Signature of a member or authorized representative of a member

YVETTE RASHID

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)