L09000074990

(R	equestor's Name)			
(A	ddress)			
(A	ddress)	<u></u>		
(C	ity/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
(B	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to	Filing Officer:			

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February 15, 2016

David Cohen Edwards Cohen 200 West Forsyth Street, Suite 1300 Jacksonville, FL 32202

SUBJECT: GOLIAD GRANT II LLC Ref. Number: L09000074990

We have received your document for GOLIAD GRANT II LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a merger, pursuant to s.605.0212(8), Florida Statutes, each party to the merger must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the articles of merger are submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 316A00003131

Annette Ramsey Regulatory Specialist II

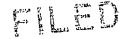
www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: Goliad Grant, LLC, a Texas li	mited liability com	any			
	Name of Surviving Party				
The enclosed Certificate of Merger and	fee(s) are submitte	d for filing.			
Please return all correspondence concern	ning this matter to				
David Cohen					
Contact Pers	son				
Edwards Cohen .					
Firm/Compa	any				
200 West Forsyth Street, Suite 1300					
Address					
Jacksonville, Florida 32202					
City, State and Z	Lip Code				
dcohen@edcolaw.com					
E-mail address: (to be used for fu	iture annual repor	notification)	-		
For further information concerning this	matter, please call	:			
David Cohen	904 at (633-79	79		
Name of Contact Person	w (Area Code	Daytime Telephone Number		
☐ Certified copy (optional) \$30.00	ı				
STREET ADDRESS:	7	MAILING AD	DRESS:		
Amendment Section		Amendment Section			
Division of Corporations		Division of Cor			
Clifton Building		O. Box 6327			
2661 Executive Center Circle Tallahassee, FL 32301		`allahassee, FL	32314		

CR2E080 (2/14)

Articles of Merger For Florida Limited Liability Company



16 FEB 25 PM 3: 54

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company (jep) in accordance TATE with s. 605.1025, Florida Statutes.

lame	<u>Jurisdiction</u>	Form/Entity Type
Soliad Grant II LLC	Florida	limited liability company
 -	· · · · · · · · · · · · · · · · · · ·	
COND: The exact name, form	/entity type, and jurisdiction of the sur	viving party are as follows:
<u>ime</u>	Jurisdiction	Form/Entity Type

THIRD: The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

· ·							
<u>FOU</u>	RTH: Please check one of the	boxes that apply	to surviving e	ntity: (if applicable)		
a	This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record are attached.						
0	This entity is created by the r	created by the merger and is a domestic filing entity, the public organic record is attached.					
			rger and is a domestic limited liability limited partnership or a domestic limited nt of qualification is attached.				
Ø	This entity is a foreign entity mailing address to which the Florida Statutes is:						
	6340 Sunset Drive, Miami, Flor	ida 33143	····				
							
Note: as the	4: If other than the date of filing feer the date this document is file. If the date inserted in this block document's effective date on the NTH: Signature(s) for Each Proof Entity/Organization:	led by the Florid k does not meet e Department of	a Department of	of State:		ill not be listed	
Goliad	Grant, LLC	F	Posame whicht		Rosanne Wright, Manager		
Goliad	Grant II LLC		Pasaine	wright	Rosanne Wright,	Manager	
Genera Florida Non-Fl	rations: Il partnerships: Il Limited Partnerships: Il crida Limited Partnerships: Il Liability Companies:	(If no director Signature of a Signatures of Signature of a	rs selected, sig	er	itor.)		
Fees:	For each Limited Liability Co For each Limited Partnership: For each Other Business Entit	mpany:	\$25.00 \$52.50 \$25.00	For each Corp	ral Partnership:	\$35.00 \$25.00 \$30.00	