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(Re	equestor's Name)	
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D. BRUCE
JAN 2 3 2012
EXAMINER

COVER LETTER

TO: Registration of Division of	on Section Corporations					
SUBJECT:	Avatar Constructi	ion and Restoration, LLC.				
	Name of Lim	nited Liability Company				
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.				
Please return all corr	respondence concerning this matte	er to the following:				
		David A. Matos	· · · · · · · · · · · · · · · · · · ·			
		Name of Person				
	Avatar Construction & Restoration, LLC.					
		Firm/Company				
	940	01 SW 4 Street, Unit 410				
		Address			12	
		Miami, Florida		至是	JAN 20	77
		City/State and Zip Code		SES SES		m
	E-mail address:	damIIIc@yahoo.com (to be used for future annual report notificat	ion)		料二二	
For further informati	on concerning this matter, please	•	,	DATE ORIBA		
	David A. Matos	at (786) 27	715006			
Na	me of Person	Area Code & Daytime To	elephone Number	•		
Enclosed is a check t	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 File Certifica Certified (addition	te of Stat Copy		osed)
Re	AILING ADDRESS: gistration Section	STREET/COURIER Registration Section Division of Compretic				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Avatar Construction	& Restoration	<u> 1, LLC.</u>			
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appea Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Compan	y were filed on	5/16/2006	and assigned		
Florida document numberL06000053595					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lia	bility company her	<u>·e</u> :			
DAML	, LLC.				
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Compa	any," the designation "	LLC" or the abbreviation		
Enter new principal offices address, if applicable:	n/a				
(Principal office address MUST BE A STREET ADDRESS)			2 7		
			>⊗ ≤		
			TANK ASS		
Enter new mailing address, if applicable:	n/a				
(Mailing address MAY BE A POST OFFICE BOX)			- F		
			Om O		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		our records, <u>enter</u>	the name of the new		
- Carrie and and an arrangement of the second of the secon	<u></u> .				
Name of New Registered Agent: n/a					
New Registered Office Address:					
	En	ter Florida street ad	dress		
		, 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>	Address	Type of Action
Mgr.	Georgina Rodriguez	9401 sw 4 street, 410 Miami, Florida 33174	☐ Add ☑ Remove
			Add Remove
			Add Remove
			AddRemove
			Add Remove
			Add Remove
D. If amer	nding any other information, enter cl	hange(s) here: (Attach additional sheets, if necessor	ary.)
			FILEL 12 JAH 20 AMIII
Dated	1/17/	2012	0
	Signature of a ma	mber or authorized representative of a member	
	Signature of a me	David A. Matos	
	T	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00