

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000049640

FILED
Dec 22, 2011
Secretary of State

Entity Name: DAMACO CONSTRUCTION ROOFING CONSULTANTS & REAL ESTATE INVESTMENT, LLC

Current Principal Place of Business:

4896 NW 6 CT SUITE # 1
SUITE # 1
DELRAY BEACH, FL 33445 US

New Principal Place of Business:

4896 NW 6 CT
SUITE # 1
DELRAY BEACH, FL 33445 US

Current Mailing Address:

4896 NW 6 CT SUITE # 1
SUITE # 1
DELRAY BEACH, FL 33445 US

New Mailing Address:

4896 NW 6 CT
SUITE # 1
DELRAY BEACH, FL 33445 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JULNER, J R MOISE
4896 NW 6 CT
SUITE # 1
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

JULNER, JULNER R MOISE
4896 NW 6 CT
SUITE # 1
DELRAY BEACH, FL 33445 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JULNER R MOISE

12/22/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: JULNER, JULNER R MOISE
Address: 4896 NW 6 COURT SUITE # 1
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: MGR
Name: METELLUS, MEVOIS
Address: 4896 NW 6 COURT SUITE #1
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: MGR
Name: ERICA, LEE MAXIME
Address: 4896 NW 6 CT SUITE#1
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: MGR
Name: VANGUARD HAMMER PROPERTY RENOVATIONS, INC
Address: 4896 NW 6 COURT SUITE #1
City-St-Zip: DELRAY BEACH, FL 33445 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JULNER R MOISE

TR

12/22/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date