

L12 000034952

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

50154

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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

2012 MAY 18 AM 10 19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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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SECRETARY OF STATE
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DAV SERVICES, LLC.

Certificate of Status	0
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Page Count	04
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T. CLINE
MAY 21 2012
EXAMINER

L12-34952

H12000134419

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAV SERVICES 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:

David H. Valdes

Name of Person

DAV SERVICES LLC

Firm/Company

11850 SW 19 Lane #177

Address

Miami, Florida 33175

City/State and Zip Code

agr1230a@aol.com

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

For further information concerning this matter, please call:

Ana R. Valdes

Name of Person

at (305)

542-6006

Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 MAY 18 AM 9:16

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Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$50.00 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

H12000134419

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

DAV SERVICES 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 03/12/2012 and assigned
Florida document number L12000034952.

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 "L.L.C."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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	David H Valdes	11850 SW 19 Lane #177 Miami, Florida 33175	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Ana R. Valdes	11850 SW 19 Lane #177 Miami Florida 33175	<input checked="" 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

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TALLAHASSEE, FLORIDA

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated

5/17/2012

Signature of a member or authorized representative of a member

Ana R. Valdes

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

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