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SECRETARY OF STATE
SECRETARY OF

J. BRYAN

NOV - 9 2010

EXAMINER

COVER LETTER

TO:	Registration Se Division of Co			
SUBJE	ECT:	Danie	ca II FL LLC	
		Name of Limi	ted Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			Grigory Smolyar Name of Person	
			Danica II FL LLC	
			Firm/Company	
			3102 Quentin Road	TALLY TO NO.
			Brooklyn, NY 11234	至
			City/State and Zip Code	SEE T
		dmen E-mail address: (i	nanagement@yahoo.com to be used for future annual report notifier	بی بن سے
For fur	ther information o	concerning this matter, please c	all:	TE T
		gory Smolyar	at (58-2221
	Name o	or rerson	Area Code & Daytime	Telephone Number
Enclose	ed is a check for t	he following amount:	_	
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regista Divisio P.O. B	JING ADDRESS: ration Section on of Corporations tox 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Danic	a II FL LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appea	rs on our records.)	 -
· (************************************	ted Elability Company)		
The Articles of Organization for this Limited Liability Comp	oany were filed on	02/04/2010	and assigned
Florida document numberL0000013465			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company her	·e:	
		= :	
The new name must be distinguishable and end with the words "	Limited Liability Compa	any," the designation "L	LC" or the abbreviation
"L.L.C."	,		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		
		ĮĄ.	SE 50
	 -	3	CRE S
Enter new mailing address, if applicable:		-	- P
(Mailing address MAY BE A POST OFFICE BOX)			AND PIN
			Fo w
			RE W
B. If amending the registered agent and/or registered	d office address on o	our records, <u>enter tl</u>	ne Rame of the new
registered agent and/or the new registered office address	<u>here</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street addi	ess
	<u> </u>	, 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 = Man MGRM = M	ager anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
Marm	Grigory Smolyar	6919 69th Way West Palm Beach, FL 33047	Add Remove
<u>Mgrm</u>	Grigory Smolyar	3102 Quentin Road Brooklyn, NY 11234	Add Remove
			Add Remove
			Add Remove
	<u> </u>		AddRemove
			Add Remove
D. If amend	ing any other information, ente	r change(s) here: (Attach additional sheets, if necessar	ry.)
			10 NOV -8 PM 3: 37
Dated	11/03 ,	<u>2010</u> .	:37 TATE ORIDA
-	Signature of a	member or authorized representative of a member	
,		Grigory Smolyar	
		Typed or printed name of signee	

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Filing Fee: \$25.00