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T. HAMPTON

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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: D.N.Y HOLDINGS LLC			
. Name of	Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning	g this matter to the following:		
DANIEL DANIEL			
Name of Person			
D.N.Y. HOLDINGS LLC			
Firm/Company			
20600 NW 47 AVE	<u>;</u>		
Address			
MIAMI, FL, 33055			
City/State and Zip Code	•••••		
DANIEL.N.DANIEL@GMAIL. E-mail address: (to be used for future annual report	COM notification)		
For further information concerning this mat	tter, please call:		
DANIEL	at (305) 810-4645		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
Tallahassee, Florida 32301	TallandsSee, Florida 32314		
Enclosed is a check for the following	ing amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	D.N.Y. HOLDIN	GS LLC
2. (a) Principal office address of limited liability compa	ny: 206	600 NW 47 AVE,
(Note: MUST BE STREET ADDRESS)	MIAMI, FL., 3305	5
(b) Mailing address of limited liability company:	20600 NW	47 AVE MIAMI FL 33055
(Note: MAY BE POST OFFICE BOX)		
01/05/2011		00001902
3. Date of filing/registration in Florida	4. Document number	er
5. (a) Registered Agent and Registered Office shown of	n the records of the Flo	orida Dept. of State:
Registered Agent:	DANIEL DANIEL	
Registered Office Address:	20600 NW 47 AVI MIAMI, FL, 33055	E
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent:	JONATHAN DAN	IEL
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	20600 NW 47 AV	,FL <u>33055</u>
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	e laws of the State of F Florida street address on tical. Or, in the case is was/were authorized erwise provided in the ay.	of the registered office of a Florida limited d by an affirmative vote articles of organization
JONATHAN DANIEL		
Printed or typed name of signee		STATE
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability compa	agree to act in this cap roper and complete pe sosition as registered a serely reflect a change ny has been notified in	pacity. I further agree to performance of my duties, gent as provided for in in the registered office writing of this change.
Signature of Registered Agent		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00