102000011824

•		
(Re	equestor's Name)	
(Ac	ldress)	
(1)	ldress)	
(^0	idless)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
, (B)	isiness Entity Nam	201
(60	isiness Litity Ivan	ie,
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
		•
Special Instructions to	Filing Officer:	
	٠]

Office Use Only



300187757563

11/16/10--01018--013 **25.00

J. SAULSBERRY **EXAMINER**

NOV 1 8 2010

COVER LETTER

TO: Registration Se Division of Cor	ection porations		
SUBJECT:	MAGIC BRO	DADCASTING, LLC	
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please return all correspo	ndence concerning this matte	r to the following:	
		LISA L. ALLEN	
		Name of Person	
	MAG	IC BROADCASTING, LLC	,
		Firm/Company	2010 7ALI
	2605 T	HOMAS DRIVE, SUITE 150	2010 NOV 16
	2003 1	Address	CO CO COMMUNICATION CONTRACTOR INCOME.
	DANIA	AA OITV DEAOLL EL 20400	Section 1 and 1 an
	PANAI	MA CITY BEACH, FL 32408 City/State and Zip Code	PH 1:06
		allen@durdenent.com	706 816
	E-mail address:	(to be used for future annual report notification)	
For further information c	oncerning this matter, please	call:	
LIS	A L. ALLEN	at (850) 230-8331	
Name o	Person	Area Code & Daytime Telephone Nu	ımber
Enclosed is a check for th	o fallowing amount		
	•		0 E''' E
▼ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	0 Filing Fee, ificate of Status & tified Copy litional copy is enclosed)
Registr Divisio P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAGIC BI	ROADCASTING, LI	LC	
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability (Company were filed on	05/15/02	and assigned
Florida document number L02000011824			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company her	<u>re</u> :	
The new name must be distinguishable and end with the wo'L.L.C."	ords "Limited Liability Comp	any," the designation "L	LC" or the abbreviatio
Enter new principal offices address, if applicable:		**************************************	2 -
(Principal office address MUST BE A STREET ADD	RESS)	<u></u>	
		H. A	1 V
		CO Pm	6
Enter new mailing address, if applicable:			유고
(Mailing address MAY BE A POST OFFICE BOX)		9:	57
	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, <u>enter t</u>	he name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street addı	ess
		, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM =	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	K. EARL DURDEN	2605 THOMAS DRIVE SUITE 150 PANAMA CITY BEACH, FL 32408	Add Remove
MGR	BARRY L. PARKER	2605 THOMAS DRIVE SUITE 150 PANAMA CITY BEACH, FL 32408	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	nding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	ZOIO NOV 16
_		r C	ON 16 BH 1:06
	OCTOBER 25	2010	
	Inil to	This	
	Signature of a	member or authorized representative of a member	
		D. SCOTT HELMS Typed or printed name of signee	
		CTONG OF OTHER HAIRS OF MERCS	

Page 2 of 2

Filing Fee: \$25.00