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EXAMINER

COVER LETTER

Registration Section
Division of Corporations

SUBJECT:	Magic Broadcasting II LLC			
	Name of Limited Liability Company			
Dear Sir or Mad	am:			
The enclosed Re	egistered Agent/Registered C	Office Change and fee(s) are submitted for filing.		
Please return all	correspondence concerning	g this matter to the following:		
	Donald G. McCoy			
	Name of Person			
	Magic Broadcasting II LLC Firm/Company	<u> </u>		
7	106 Laird Street, Suite 102 Address	02		
Pana	ma City Beach, Florida 3. City/State and Zip Code	32408		
E-mail address:	toni@magicfl.com	notification)		
For further information concerning this matter, please call:				
	Toni Garrett	at (850) 230-5855 Area Code & Daytime Telephone Number		
Registrati Division o Clifton Bo 2661 Exe	COURIER ADDRESS: on Section of Corporations uilding cutive Center Circle ee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:				
√ \$25 F	iling 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.

Name of the limited liability company:	Magic Broadcasting II LLC
2. (a) Principal office address of limited liability compan	y: 7106 Laird Street, Suite 102
(Note: MUST BE STREET ADDRESS)	Panama City Beach, Florida 32408
(b) Mailing address of limited liability company:	Same
(Note: MAY BE POST OFFICE BOX)	
03/12/2010	L10000028069
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept, of State:
Registered Agent:	Donald G. McCoy
Registered Office Address:	100 Cherry Street, Apt 801
	Panama City, Florida 32401
NEW Registered Agent: NEW Registered Office Address:	7106 Laird Street, Suite 102
(MUST BE FLORIDA STREET ADDRESS)	Panama City Beach ,FL32408
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s 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	lorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
Donald G. McCoy Printed or typed name of signee	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address. I hereby confirm that the inited liability companions of Registered Agent	agree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.
Division of Corporations, P.O. Box 63	27, Tallahassee, FL 32314

FILING FEE: \$25.00