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SECRETARY OF STATE

OCT 25 2013

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Majic 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 this matter to	the following:		
Nathan M Workman Name of Person	<u> </u>		
Radius Law Group	2013 C		
Firm/Company 301 W Bay Street, 14th Floor, Suite 1410	ZOLB OCT 21 FM ED: 33 SECRETARY OF STATE TALL AHASSFE, FLOAD		
Address			
Jacksonville, FL 32202	ラー・Cartain Cartain Cart		
City/State and Zip Code			
nworkman@radiuslaw.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please cal	1:		
Nathan M Workman at 704	, 325-9325		
Name of Person	Area Code & Daytime Telephone Number		
Registration Section Re Division of Corporations Di Clifton Building P.6	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

INHS18 (5/08)

■ \$25 Filing Fee

Tallahassee, Florida 32301

Enclosed is a check for the following amount:

□ \$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: Maje Holdings, LLC 2. (a) Principal office address of limited liability company: 3001 SW 3RD AVENUE (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 10724/2012 112000095773 3. Date of filing/registration in Florida 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: MARKO, DAVID E 108	_	
(Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) (c) Mamm, FL 33129 1.12000095773 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: Registered Office Address: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vite members of the limited liability company or as otherwise provided in the articles of organization the operating agreement of the limited liability company. Signature Of a member or authorized representance of a member of the limited liability company. Signature Of a member or authorized representance of a member of the limited liability company. James E McDonough IV, Member/Manager Printed or typed name of signee	1. Name of the limited liability company: Majic Holdings, LLC	
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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agr comply with the provisions of all statutes relative to the proper and complete performance of my duand I am familiar with and accept the obligations of my position as registered agent as provided for Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered off address! I hereby confirm that the limited liability company has been notified in writing of this change.	Printed or typed name of signee	-
Signature of Registered Agent	1/4/1/	gree 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 has been notified in writing of this change.