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S. PRATHER

COVER LETTER

TO: Registration Section

INHS18 (2/14)

Divi	sion of Corporations							
SUBJECT:	MAGIC RESERVE GP, LLC							
JOBJECT.	Name of Limited Liability Company							
Dear Sir or N	Madam:							
The enclosed	d Registered Agent/Registered Office	ce Change ar	d fee(s) are submitted for filing.					
Please return	all correspondence concerning this	s matter to th	e following:					
Rodrigo C	unha							
	Name of Person							
MAGIC RI	ESERVE GP, LLC							
· · · · · ·	Firm/Company		· 					
121 South	Orange Ave, Suite 850							
	Address							
Orlando, F	FL 32801		<u></u>					
	City/State and Zip Code							
	magicdevelopment.com							
	address: (to be used for future annu		tification)					
For further i	nformation concerning this matter,	please call:						
Rodrigo C	unha	at (407-992-8802					
	Name of Person		Area Code & Daytime Telephone Number					
Reg	REET/COURIER ADDRESS: istration Section	ī	MAILING ADDRESS: Registration Section					
•			Division of Corporations P.O. Box 6327					
266	1 Executive Center Circle ahassee, Florida 32301		Fallahassee, Florida 32314					
Enc	losed is a check for the following	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 605.0114 or 605.0116, 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.	Na	me of the limited liability company:	MAGIC RESE	RVE	GF	P, LLC					
2.	(a)			_ (t	b) _						
	\ _,	Principal office address of limited liab (Note: MUST BE STREET AL					•	dress of limite MAY BE POS			
		121 South Orange Ave, Suite	850	_		121 Sout	h Orar	nge Ave,	Suite 8	350	
		Orlando, FL 32801		Orlando,			FL 32	1801			
		3/21/17			L	1700006	4051				
3.		Date of filing/registration in	Florida	4.			Docume	ent number			
5.	(a)	Stacey Stuck									
٥.	(4)	Registered Agent and Registered Office show	n on the records of th	e Florid	la D	ept. of State:					
		_						,,	: 5	a D	
Registered Office Address (MUST BE FLORIDA STREET ADDRES					S)					=	
		121 South Orange Ave, Suite	850 						-		
		Orlando,	. FL ³	32801	l					<u>ω</u> :	
			· '								
	(b)	Rodrigo Cunha							•	=	
		Enter name of <u>NEW Registered Agent</u> and/o	r <u>NEW Registered C</u>	office ac	<u>ddr</u>	<u>ess</u> :			~ -	_	
		NEW Registered Office Address:									
		121 South Orange Ave, Suite	850								
		Orlando	, FL_	32801	1						
the ag wa	ent v ent v	imited liability company is not organizing or changes are made, the Florida will be identical. Or, in the case of a Fere authorized by an affirmative vote coles of organization or the operating a	street address of t Torida limited lial of the members of	he regi bility c the lin	iste con mit lia	ered office npany, it is ed liability ability com	and the hereby compa pany.	business of confirmed ny or as oth	office of that the herwise	the registe change(s) provided i	ered
_	Siona	ture of a member or authorized representative	of a member			RO DRY	Printed o	or typed name	of signer	<u>.</u>	
l protection	here ovisi e obl mer tifie	by accept the appointment as registered on a member of all statutes relative to the proplet ions of all statutes relative to the proplet ions of my position as registered of the registered of in writing of this change. The of Registered Agent	nd agant and agree	ee to ac perforn for in ereby c	or i	n this cana	wite L	further aar	ee to co	mnly with	the cept led