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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #) .
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12/16/13--01008--006 **35.00

SECRETARY OF STATE
STORY OF CORPORATION

D/25, (10)/20/13

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: MAGICAL MEDIA, INC. (Name of Conporation) DOCUMENT NUMBER: PO3000007964
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
LAUREN ADAM 5 (Name of Person)
(Name of Finn/Company) MAGICAL MEDIA, INC. 4811 LYONS TECHNOLOGY PKWY SUITE 11 COCONUT CREEK, FL 33073
(Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (954) 722-9477 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. <u>Lauren Adams</u> , herebyresign as <u>Vice-President</u>	+
of magical Media, INC.	
(Name of Corporation) O 3 00000 7960, a corporation organized under the laws of the State of (Document Number, if known)	

Sauch Odans
(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314