

PD9000050406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

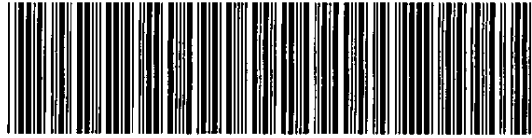
(Business Entity Name)

(Document Number)

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 AUG 31 PM 2:11

7:00 PM AUG 31 2009



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 19, 2009

HELMUT GOELLNITZ  
MAGNUM ADVERTISING SERVICES, INC.  
3923 LAKE WORTH RD STE 216  
LAKE WORTH, FL 33461

SUBJECT: MAGNUM ADVERTISING SERVICES, INC.  
Ref. Number: P09000050406

We have received your document for MAGNUM ADVERTISING SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 709A00028112

RECEIVED  
2009 AUG 31 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MAGNUM ADVERTISING SERVICES, INC.  
Name of Corporation

**DOCUMENT NUMBER:** P09000050406

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Helmut Goellnitz  
Name of Contact Person

Magnum Advertising Services, Inc.  
Firm/Company

3923 Lake Worth Road Suite 216  
Address

Lake Worth, FL 33461  
City/State and Zip Code

helmut@magnumadvertisingservices.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Helmut Goellnitz at ( 561 ) 577-0843  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Magnum Advertising Services, Inc.
2. The principal office address: 3923 Lake Worth Road Suite 216  
Lake Worth, FL 33461
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 06/09/2009 Document number: P09000050406
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

MCLEAN, SUSAN CATHLEEN

5371-2 10TH AVE NORTH

LAKE WORTH, FL 33463 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Goellnitz, Helmut

3923 Lake Worth Road Suite 216

P.O. Box NOT acceptable

Lake Worth, FL 33461

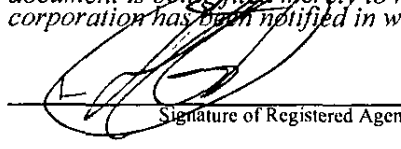
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

Helmut Goellnitz, VPD  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
\_\_\_\_\_  
Signature of Registered Agent

08/13/09  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

**\*\*\* FILING FEE: \$35.00 \*\*\***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)

FILED  
STATE  
SECRETARY OF CORPORATIONS  
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