F02000004028

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: MAGIX COMPUTER PRODUCTS : INTERNATIONAL CO. (Name of corporation)
(Name of corporation)
DOCUMENT NUMBER: F02000006028
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:
MICLIATI NUEDMANNI
MICHAEL NIERMANN (Name of contact person)
MAGIX COMPUTER PRODUCTS INT'L CORP (Firm/Company)
701 SW 27th AVE STE 1403 (Address)
MIAMI, FL 33135 (City/state and zip code)
For further information concerning this matter, please call:
Michael Niermann at (305) 642-6300
(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 Division of Corporations

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

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

_	provisions of sections of mge is submitted for a co			•	•
	r to change its registered				
1. The name of t	he corporation: MAGIX (COMPUTER PRO	DUCTS INTERN	ATIONAL CO.	·
	office address: 701 SW				
			• • • • • • • • • • • • • • • • • • • •		· · · · · · · · · · · · · · · · · · ·
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 20	002	Document nur	nber: F020000	06028
5. The name and Florida Depar	street address of the curtment of State:	rent registered age	ent and registered of	office on file wit	h the
	JOHN AUVIL				
	1680 MICHIGAN AVE	STE 900			· · · · · · · · · · · · · · · · · · ·
	MIAMI BEACH, FL 331	139		-	
6. The name and (if changed):	l street address of the nev	v registered agent	(if changed) and /o	or registered offi	ce The P D
	JOHN AUVIL		· · · · · · · · · · · · · · · · · ·		- 5
	701 SW 27th AVE STE				
	(P.O.	Box NOT acceptable)		_ · _ ,	t t e re e
	MIAMI, FL 33135	<u> </u>		<u></u>	· · · · · · · · · · · · · · · · · · ·
The street addre as changed will	ss of its registered offic be identical.	e and the street a	ddress of the busin	ness office of its	; registered agent,
Such change wa authorized by th	is authorized by resoluti	on duly adopted ion has been noti	by its board of dir fied in writing of	ectors or by an the change.	officer so
- (Signatu	re of an officer or director)		ERHARD REIN,	PRESIDENT For typed name and to	tie)
I hereby accept I further agree t of my duties, an document is bein corporation has	the appointment as regi o comply with the provi d I am familiar with and ng filed merely to reflect been notified in writing	stered agent and sions of all statut I accept the oblig t a change in the t of this change.	agree to act in thi es relative to the p ation of my positi registered office o	is capacity. Proper and com On as registered Address, I hereb	plete performance I agent. Or, if this y confirm that the
71	101		. 05 - 16	4-2005	:
/Sig	nature of Registered Agent)		- 10-16	(Date)	
If signing on bel	half of an entity:				
(T)	yped or Printed Name)		reconstruction of the		