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(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Magdalina Estates South Condominium Assoc., Inc.
Name of Corporation

DOCUMENT NUMBER: N08000003799

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:

Tim Loehr
Name of Contact Person

Omni Management Services, Inc.
Firm/Company

8695 College Parkway Suite 1274
Address

Ft. Myers, Florida 33919
City/State and Zip Code

tbotrager@omni-property.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tom Bontrager at (239) 985-4249
Name of Contact Person Area Code & Daytime Telephone Number

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

<u>Mailing Address:</u>	<u>Street Address:</u>
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	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: Magdalena Estates South Condominium Assoc., Inc
- 2. The principal office address: 8695 College Parkway Suite 1274
Ft. Myers, Florida 33919
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: April 2008 Document number: N08000003799

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)

Michael R. McKinley ESQ
223 Taylor Street
Punta Gorda, Florida 33950

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

Omni Management Services, Inc.
8695 College Parkway Suite 1274
P.O. Box NOT acceptable
Ft. Myers, Florida 33919

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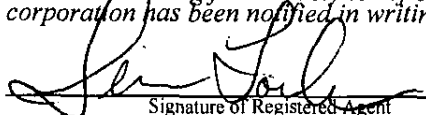
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

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

September 13, 2011

Date

If signing on behalf of an entity:

Tim Loehr

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