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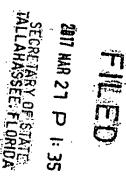
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Mr Christnas Lights Name of Corporation
DOCUMENT NUMBER. P14 0000 50892
DOCUMENT NUMBER: 7 1 1 0000 300 1 2
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:
Name of Contact Person
Firm/Company
1508 BAY RD #1029
· ==-==
MIAMI BEACH F 331397
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: MICHAEL ABLONICKY at 305, 467-72-64 Name of Contact Person Area Code & Daytime Telephone Number
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

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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.
1. The name of the corporation: Mr Christmas Lights
2. The principal office address: 1508 BAY LD #1029 MIAMI BEACH F 33139
3. The mailing address (if different):
4. Date of incorporation/qualification: 6 10 14 Document number: P1400050892
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)
(DEDOLATE CORPORATION) Service Company
274 Control 1201 HAMS St
TALLAHASSEE, FL32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Michael Masionicky
Michael Masionicky 1508 BAY RD #1029
P.O. Box NOT acceptable
MIAM, BENEUL FI 33139
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.
Michael Helowicky
Signature of an officer of director Printed or typed name and title Press of a programment as registered agent and agree to act in this capacity.
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.
3/22/19 = 7
Signature of Registored Agent Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *