

P150000 99865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

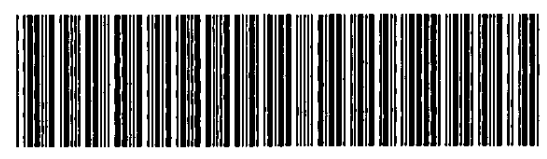
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900296683419 ✓

05/16/17--01010--015 \*\*35.00

S. TALLENT  
MAY 02 2017

FILED  
17 APR 21 PM 3:05  
STATE ARCHIVE OF FLORIDA  
TALLAHASSEE, FLORIDA

R/A-ct



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 11, 2017

STUART YADGAROFF  
MAYS 5 CORPORATION  
10401 NW 53RD ST  
SUNRISE, FL 33351

SUBJECT: MAYS 5 CORPORATION  
Ref. Number: P15000099865

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The capacity of the person signing the document must be typed or printed beneath or opposite the signature.

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) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 317A00005341

*Rec 4/12/17*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 21, 2017

STUART YADGAROFF  
MAYS 5 CORPORATION  
10401 NW 53RD ST  
SUNRISE, FL 33351

SUBJECT: MAYS 5 CORPORATION  
Ref. Number: P15000099865

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

AN OFFICER/DIRECTOR OR REGISTERED AGENT MUST SIGN AND DATE THE DOCUMENT.

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) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 317A00005341

RECEIVED

17 APR -6 PM 3:35

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Mays 5 Corporation  
Name of Corporation

**DOCUMENT NUMBER:** P15000099865

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:

Stuart Yadgaroff  
Name of Contact Person

Mays 5 Corporation  
Firm/Company

10401 NW 53RD ST  
Address

SUNRISE, FL 33351  
City/State and Zip Code

sales@lightnupfl.com ✓  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alexandra Yadgaroff at ( 954 ) 797-7778  
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Mays 5 corporation  
2. The principal office address: 10401 NW 53RD ST. SUNRISE, FL 33351  
3. The mailing address (if different): " "

4. Date of incorporation/qualification: 12/14/2015 Document number: P15 000099865

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)

Stuart Yadgaroff  
1935 NW 18TH ST  
Pompano Beach, FL 33069

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

stuart yadgaroff  
10401 NW 53RD ST  
SUNRISE, FL 33351

P.O. Box NOT acceptable

FILED  
17 APR 21 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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]  
Signature of an officer or director

STUART YADGAROFF  
Printed or typed name and title  
owner + President

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]  
Signature of Registered Agent

4/3/17  
Date

If signing on behalf of an entity:

STUART YADGAROFF  
Typed or Printed Name

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