

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000074931

**Entity Name:** INMOTION PC, LLC

**FILED**  
**Jan 27, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

15794 SW 140 ST  
MIAMI, FL 33196

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 771778  
MIAMI, FL 33177

**New Mailing Address:**

**FEI Number:** 20-5428315      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SAIZ, ALEJANDRO  
15794 SW 140 ST  
MIAMI, FL 33196      US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALEJANDRO SAIZ

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** SAIZ, ALEJANDRO  
**Address:** 15794 SW 140 ST  
**City-St-Zip:** MIAMI, FL 33196

**Title:** MGRM  
**Name:** SAIZ, XMUCANE  
**Address:** 15794 SW 140 ST  
**City-St-Zip:** MIAMI, FL 33196

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALEJANDRO SAIZ

MGR

01/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date