

P100000 95652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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C. GOLDEN

AUG 22 2020

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LIFE IN MOTION, INC.

Name of Corporation

DOCUMENT NUMBER: P10000095652

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:

Lacole T Foster Grant

Name of Contact Person

Voice of Hope, Inc.

Firm/Company

540 Carillon Pkwy #2058

Address

Saint Petersburg FL 33716

City/State and Zip Code

lacolettfoster@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lacole Foster Grant

Name of Contact Person

at (813) 260 - 9443

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 26, 2020

LACOLE T FOSTER GRANT
540 CARILLON PARKWAY #2058
SAINT PETERSBURG, FL 33716

SUBJECT: LIFE IN MOTION, INC.
Ref. Number: P10000095652

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):

You failed to list the new registered agent/address in number 6.

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

The registered agent must sign accepting the designation.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 420A00012674

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 Pinellas County, FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LIFE IN MOTION, INC
2. The principal office address: 540 Carillon Pkwy #2058
Saint Petersburg FL 33716
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/23/2010 Document number: P10000095652

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)

resigned - please remove INCORP SERVICES, INC

17888 67TH COURT NORTH

LOXAHATCHEE, FL 33470

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

Lacole FOSTER GRANT

540 Carillon Pkwy #2058 St Petersburg FL
33716

P.O. Box NOT acceptable

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.

Lacole Foster Grant
Signature of an officer or director

Lacole T Foster Grant

(Printed or typed name and title)

06-07-2020

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.

Lacole Foster Grant
Signature of Registered Agent

08/03/2020
Date

If signing on behalf of an entity:

Lacole FOSTER GRANT
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