

P15000091844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

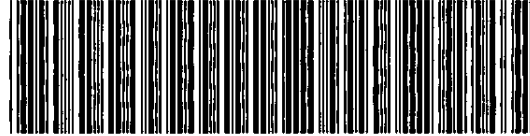
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2015 DEC 23 PM 4:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

DEC 23 2014
C. CARROTHERS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 8, 2015

CHAUNTEL BELLAMY
SAVE A LOT MOVERS INC
1740 NW 67 ST
MIAMI, FL 33147

SUBJECT: SAVE A LOT MOVERS INC.
Ref. Number: P15000091844

We have received your document for SAVE A LOT MOVERS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

THE FORM YOU SUBMITTED IS USED FOR A ALIEN BUSINESS

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.

Cathy A Carrothers
Regulatory Specialist

Letter Number: 915A00025629

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SAVE A LOT MOVERS INC
(Name of Corporation)

DOCUMENT NUMBER: P150000 91844

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KARL LOVE
(Name of Person)

SAVE A LOT MOVERS INC.
(Name of Firm/Company)

1740 N.W. 67 ST.
(Address)

MIAMI FL 33147
(City/State and Zip Code)

For further information concerning this matter, please call:

Jerome Nelson at (786) 350-6406
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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

1. The name of the corporation: Save A lot Movers Inc.
2. The principal office address: N/A
3. The mailing address (if different): N/A
4. Date of incorporation/qualification: _____ Document number: P15000091844

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)

Chauntel Bellamy
1740 NW 67 St
Miami FL 33147

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

Karl Love
Same

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.

Signature of an officer or director: Jerome Nelson 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.

Karl Love Date

If signing on behalf of an entity:

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
CR2E045 (03/12)