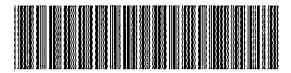
-05000000188

(Re	equestor's Name)	
(Ad	idress)	 ,
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e#)
PICK-UP	MAIT	MAIL
(Bı	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Capies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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RAChg.

COVER LETTER

TO: Amendment Section Division of Corporations	- .		
SUBJECT: HF Administrative Services, Name of Co	Inc.		
DOCUMENT NUMBER: F05000000188			
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:			
Sean Nataro			
(Name of Con	tact Person)		
HF Administrative Services, Inc. (Firm/Company)			
25 Broadway, 9th Floor (Address)			
New York, NY 10004 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Elizabeth Hwang (Name of Contact Person)	at (212) 801-6297 (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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or ange is submitted for a corporation organized under the left to change its registered office or registered agent, or b	laws of the State of New York
1. The name of	the corporation: HF Administrative Services, Inc.	
	office address: 25 Broadway, 9th Floor	
Zi zito principal	New York, NY 10004	
3. The mailing a	address (if different):	
4. Date of incor	rporation/qualification: January 11, 2005_ Document	nt number: F05000000188
	nd street address of the current registered agent and registe artment of State:	ered office on file with the
	CT Corporation	2005
	1200 South Pine Island	2005 UEC
	Plantation, FL 33324	
6. The name an (if changed):	nd street address of the new registered agent (if changed):	and /or registered office
	HF Administrative Services, Inc.	
	500 Winderley Place	<u>-</u>
	(P.O. Box NOT acceptable) Maitland, FL 32751	
The street addr	ress of its registered office and the street address of the ll be identical.	business office of its registered agent,
Such change wanthorized by	was authorized by resolution duly adopted by its board the board, or the corporation has been notified in writing	of directors or by an officer so ng of the change.
(Signal	Thomas	Bergdall, Secretary & Director
I hereby accept I further agree of my duties, a document is be corporation ha	of the appointment as registered agent and agree to act to comply with the provisions of all statutes relative to and I am familiar with and accept the obligation of my eing filed merely to reflect a change in the registered of as been notified in writing of this change.	in this capacity, of the proper and complete performance position as registered agent. Or, if this flice address, I hereby confirm that the
·	Signature of Registered Agent) oehalf of an entity:	(Date)
0 0	•	
Thomas Be	(Typed or Printed Name)	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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