2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000006505

Entity Name: HALLMARK HUMAN RESOURCES, INC.

FILED Oct 16, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	CREEK HWY Y, TX 76049	US					
Current Mailing Address:				New Mailing Address:			
P.O. BOX 5825 GRANBURY, TX 76049 US		US					
FEI Number: 75-2649554		FEI Number Applied For ()	FEI Num	Number Not Applicable () Certi			e of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DRIVE SUTIE A TALLAHASSEE, FL 32301 US				REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DRIVE SUITE A TALLAHASSEE, FL 32301 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: JIM GOVENER				10/16/2009			
	Electronic	Signature of Registered Agent	t			D	ate
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () D BAY, WAYNE 19000 TERRA PL EDMOND, OK 73			Title: Name: Address: City-St-Zip:	()) Change() Addition
Title: Name: Address: City-St-Zip:	CEO () D WILLIS, TOM 5006 LARGO GRANBURY, TX			Title: Name: Address: City-St-Zip:	()) Change() Addition
Title: Name: Address: City-St-Zip:	TD () D AUPPERLE, STEV 5900 EMBER GLI HALTOM CITY, TX	VEN L EN DR.		Title: Name: Address: City-St-Zip:	D (X AUPPERLE, ST 5900 EMBER O HALTOM CITY,	GLEN DR.) Addition
Title: Name: Address: City-St-Zip:	VD () D POZSONY, BOB 1660 69TH STRE LOXAHATCHEE, I	ET NORTH		Title: Name: Address: City-St-Zip:	D (X QUINN, THOMA 9 CORTLAND T MAHWAH, NJ	ΓRAIL) Addition
Title: Name: Address: City-St-Zip:	S () D WILLIS, DELENA 5302 FAIRWAY O FRANBURY, TX	zir.		Title: Name: Address: City-St-Zip:	S (X WILLIS, DELEI 5302 FAIRWAY GRANBURY, T	CIR.) Addition
Title: Name: Address: City-St-Zip:	D () D QUINN, THOMAS 9 CORTLAND TRI MAHWAH, NJ 07			Title: Name: Address: City-St-Zip:	D (X GIAMBALVO, J 719 WARWICK GRAPEVINE, T	() Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS WILLIS CEO 10/16/2009