L04000053650

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PHYLLICH OF CORPORATIONS
ALLAHASSEE, FI ORIDAN

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COVER LETTER

Division of Corporations
SUBJECT: Change of Registered office & agent (Name of corporation)
DOCUMENT NUMBER: LD 4000053650
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:
Allan A. Honnessy (Name of contact person)
Hallmark Realty P.L. (Firm/Company) Fig. 5.
5928 Beneva woods way (Address)
Saya 5 ota, F1. 34233 (City/state and zip code)
For further information concerning this matter, please call:
Allan A. Honnessy at (941) 921-6881 (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 409 E. Gaines Street Tallahassee, FL 32399

TO:

Amendment Section



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 1, 2005

ALLAN A. HONNESSY HALLMARK REALTY, P.L. 5428 BENEVA WOODS WAY SARASOTA, FL 34233

SUBJECT: HALLMARK REALTY, P.L.

Ref. Number: L04000053650



We have received your document for HALLMARK REALTY, P.L. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan Document Specialist

Letter Number: 605A00014055

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is:	AllMARK REALTY, P.L.
2. The mailing address of the limited liability compa	ny is: 5428 Beneva Woods Way.
Sara So ta, Fl. 34237	
7,5004	10 40000 53650
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered Florida Department of State: Ho M Name	Hawk
-	ress and Zip and/or office:
•	D. Box NOT acceptable)
Sarasota, FL City, State a	34233 and Zip
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the charthe members of the limited liability company or as of the operating agreement of the limited liability company. (Signature of a member or authorized representative of member)	the Florida street address of the registered office identical. Or, in the case of a Florida limited age(s) was/were authorized by an affirmative vote of nerwise provided in the articles of organization or
(Printed or typed name of signee)	3/7/05
I hereby accept the appointment as registered agent of comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of the Chapter 508, F.S. Or, if this document is being filled address, I hereby confirm that the limited liability confirm	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the registered office apany has been notified in writing of this change.
(Signature of Registered Agent) Division of Corporations, P.O. Bo	ox 6327, Tallahassee, FL 32314

FILING FEE: \$25.00