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COVER LETTER,

то:	Registration Section Division of Corporations	ě		
SHRI	ECT: Ha	llmark Baldw	in Village, LLC	
оо ва		Name of Limited Liability Company		
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.	
Please	return all correspondence concerning th	is matter to the	following:	
April	Cliche			
	Name of Person			
Halln	nark Management, Inc.			
	Firm/Company		_	
3111	Paces Mill Rd. Ste. A-250			
	Address			
Atlan	nta, GA 30339			
	City/State and Zip Code		_	
aclic	he@hallmarkco.com			
Ī	E-mail address: (to be used for future ann	nual report notif	ication)	
For fu	rther information concerning this matter,	, please call:		
April	Cliche	770 at (984-2100 x118	
	Name of Person		Area Code & Daytime Telephone Number	
Registration Section Registration of Corporations Division Clifton Building P.O. Bo		AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314		
	Enclosed is a check for the following	g amount:		
	☑ \$25 Filing Fee	□ \$5	55 Filing Fee & Certified Copy	
INHS1	8 (2/14)			

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Name of the limited liability company: Hallmark Baldwin Village, LLC						
					Mailing address of limited liability company:		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u> </u>	1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		4040 West Newberry Road, Suite 950B		3111 Pa	ces Mill Rd. Ste. A-250		
		Gainesville, FL 32607	_	Atlanta,	GA 30339		
		08/14/2015		L1500013	39312		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)						
•	(4)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State	11		
		Susan Adams					
		Registered Office Address (MUST BE FLORIDA STREET.	· 				
		4040 West Newberry Road, Suite 950B					
		Gainesville , FL	32607	,	G JAN		
					Carried Annual Contraction of the Contraction of th		
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			SER 7		
		er name of NEW Registered Agent and/or NEW Registered Office address:			TO A I		
	The Hallmark Companies, Inc.				1088 1088 1088 1088 1088 1088 1088 1088		
		NEW Registered Office Address:					
4040 West Newberry Road, Suite 950B							
		Gainesville , FL	32607	•			
lt the	the I: e cha	imited liability company is not organized under the lavinge or changes are made, the Florida street address of	ws of the	e State of Flo istered office	orida, it is hereby confirmed that after and the business office of the registered		
ag	ent v	will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of	ability c	ompany, it is	s hereby confirmed that the change(s)		
		cles of organization or the operating agreement of the					
		Moute Western	Ma	artin H. Pet	ersen		
	Signa	ture of a member or authorized representative of a member		120	Printed or typed name of signee		
pro the to	ovisi 2 obl merc	by accept the appointment as registered agent and agroups on sof all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I did not in writing of this change.	ree to ac perforn d for in hereby c	t in this cape vance of my c Chapter 605 confirm that i	acity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been		
Si	enatu	re of Registered Agent					