## L15000 179704

(R	equestor's Name)							
(Address)								
(Address)								
(C	ity/State/Zip/Phone	<del>:</del> #)						
PICK-UP	WAIT	MAIL						
(B	usiness Entity Nam	ne)						
(Document Number)								
Certified Copies	Certificates	of Status						
Special Instructions to Filing Officer:								

Office Use Only



700280740067

01/07/16--01021--001 \*\*695.00



JAN 08 2016 J SHIVERS

## COVER LETTER,

TO: Registration Section

Division of Corporations					
SUBJECT: Hall	Hallmark Village Walk, LLC				
	e of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this	s matter to the following:				
April Cliche					
Name of Person					
Hallmark Management, Inc.					
Firm/Company	<del></del>				
3111 Paces Mill Rd. Ste. A-250					
Address					
Atlanta, GA 30339					
City/State and Zip Code					
acliche@hallmarkco.com					
E-mail address: (to be used for future annu	ual report notification)				
For further information concerning this matter, p	please call:				
April Cliche	770 984-2100 x118				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:					
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				
INHS18 (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.	Na	me of the limited liability company: Hallmark Vi	llage W	alk	k, LLC		
	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	<u> </u>	(0)	Mailing add	dress of limited liability company:  AAY BE POST OFFICE BOX)	
		4040 West Newberry Road, Suite 950B			3111 Paces Mill	Rd. Ste. A-250	
		Gainesville, FL 32607			Atlanta, GA 303	39	
		08/14/2015		L	.15000139704		
3.		Date of filing/registration in Florida	4.		Docume	nt number	
5.	(a)						
٠.	(4)	Registered Agent and Registered Office shown on the records of	of the Flori	da I	Dept. of State:		
		Susan Adams					
		Registered Office Address (MUST BE FLORIDA STREET	T ADDRE	<u>SS)</u>		A Commence of the Commence of	
		4040 West Newberry Road, Suite 950B		16 SEE			
		Gainesville	3260°	7	<del></del>	JAN-7 JAN-7 AMASSEE	
						SSE - TEM	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:						AMII: 05	
		Enter name of NEW Registered Agent and/or NEW Register	GS =				
		The Hallmark Companies, Inc.				AMII: 03	
		NEW Registered Office Address:				<b>⊅&gt;</b> `	
4040 West Newberry Road, Suite 950B							
		Gainesville	<sub>:L</sub> 3260	7	,		
		, F	Lozoo	<u>'</u>			
the ag wa	e cha ent v is/we	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the reg liability of of the li	gist con mit	ered office and the npany, it is hereby of ted liability compan	business office of the registered confirmed that the change(s)	
_		Moth Western	<u>M</u>	art	in H. Petersen		
Signature of a member or authorized representative of a member			Printed or typed name of signee				
prothe to	ovisi e obl mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and complet igations of my position as registered agent as providely reflect a change in the registered office address, if in writing of this change.	gree to a te perford led for in I hereby	ct i mai coi	n this capacity. I fince of my duties, an hapter 605, F.S. On nfirm that the limite	urther agree to comply with the ad I am familiar with and accept r, if this document is being filed ad liability company has been	
Si	gnatu	re of Registered Agent					