5/8/

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 01, 2002 8:00 am
Secretary of State
05-08-2002 90076 022 ****50.00

DOCUMENT # M00000001610

1. Entity Name
HBK FINANCIAL SERVICES LLC

95753

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
7680 MARKET STREET YOUNGSTOWN OH 44512	7680 MARKET STREET YOUNGSTOWN OH 44512

2. Principal Place of Business	3. Mailing Address
3777 TAMIAMI TRAIL NORTH	
Suite, Apt. #, etc. SUITE 200	Suite, Apt. #, etc.
City & State NAPLES, FL	City & State
Zip 34103 Country COLLIER	Zip Country

4. FEI Number 34-1925718 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BAER, DAN E CPA HILL, BARTH & KING LLC 377 TAMIAMI TRAIL NORTH, SUITE 200 NAPLES FL 34103	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR HBK FINANCIAL SERVICES LLC 7680 MARKET STREET YOUNGSTOWN OH 44512	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MNG. MEMBER HBK FINANCIAL HOLDINGS LLC 7680 MARKET ST. BOARDMAN, OH 44512	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGING MEMBER CHRISTOPHER SORCE 235 W. 6TH ST ERIE, PA 16507	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGING MEMBER GREGORY SORCE 235 W. 6TH ST. ERIE, PA 16507	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CHIEF OPERATING OFFICER DEAN PICCIRILLO 235 W. 6TH ST. ERIE, PA 16507	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E083 (9/01)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [illegible] 4-25-02 330-758-8613
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #