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(Business Entity Name)									
(Document Number)									
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## COVER LETTER

TO:	Registration Section Division of Corporations						
SURJI	ЕСТ:	Hallmark Group	Services of Alabama, LLC				
5020		Name of Limited Liability Company					
Dear S	Sir or Madam:						
The en	nclosed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning	ng this matter to the	following:				
April	Cliche						
	Name of Person		<del></del>				
Hallm	nark Management, Inc.						
	Firm/Company		_				
3111	Paces Mill Rd. Ste. A-250						
	Address		_				
Atlan	ta, GA 30339						
	City/State and Zip Co	de	_				
aclich	ne@hallmarkco.com						
E	E-mail address: (to be used for future	annual report notif	īcation)				
For fur	rther information concerning this ma	tter, please call:					
April	Cliche	770 at (	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		Re Div P.C	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	<b>□</b> \$5	55 Filing Fee & Certified Copy				
INHS18	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.	Na	me of the limited liability company: Hallmark Gro	oup Se	rvices of A	labama, LL	С		
	• /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)					
		4040 West Newberry Road, Suite 950B						
		Gainesville, FL 32607	Atlanta, GA 30339					
		02/04/2010		M100000	000556			
3.		Date of filing/registration in Florida	4.		Document nu	umber		
5.	(a)							
٠.	(4)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of Stat	– e:			
		Susan Adams						
		Registered Office Address (MUST BE FLORIDA STREET	-					
		4040 West Newberry Road, Suite 950B						
(		Gainesville , FI	3260	7	-	E SEL	<del>-</del> 6	
						全점	JAN	
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		_	念室	1	१९४ वृद्धाः इस्तर्भाः	
		Enter name of NEW Registered Agent and/or NEW Registered	Office a	JAN - 7 AM -8: 18 AHASSEE FLORIDA			~	ć
		The Hallmark Companies, Inc.					ii Ö	Second Second
		NEW Registered Office Address:						ै- इन्हेज़र्की
		4040 West Newberry Road, Suite 950B			-	7.	<b> </b>	
		Gainesville , FI.	3260	7	_			
the age was	cha nt w s/we	mited liability company is not organized under the larnge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	ws of the regability of the li	e State of Floristered office company, it i	e and the busing the subsection of the subsectio	ness office o	of the	registered
S	Signature of a member or authorized representative of a member			Printed or typed name of signee				
I h pro the to n not	ereb visio obli nere ified	by accept the appointment as registered agent and aging ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I is more than the complete in the complete and the change.	ree to a perfor d for in hereby	ct in this cap nance of my Chapter 603 confirm that	acity. I furthe duties, and I o 5, F.S. Or, if t the limited lia	er agree to c im familiar v his documer ibility compo	compl with at is l any h	ly with the and accept being filed as been
Sig	natu	re of Registered Agent						