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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	Hallmark Group Services- St. Cloud, LLC
SUBJECT:	Name of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	d 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	
Hallmark Management, Inc.	
Firm/Company	
3111 Paces Mill Rd. Ste. A-250	
Address	
Atlanta, GA 30339	
City/State and Zip Co	ode
acliche@hallmarkco.com	
E-mail address: (to be used for future	e annual report notification)
For further information concerning this ma	atter, please call:
April Cliche	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	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the follow	wing 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.

	me of the limited liability company: Hallmark Gro	<u> </u>		·	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 4040 West Newberry Road, Suite 950B	(Mailing address of limited liability comp. (Note: MAY BE POST OFFICE BO) Paces Mill Rd. Ste. A-250	
		_			
	Gainesville, FL 32607	_	Atlanta,	a, GA 30339	
	07/16/2014		M14000	0005046	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)					
()	Registered Agent and Registered Office shown on the records of Susan Adams	he Flori	da Dept. of Sta	ate:	
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRES	<u>SS)</u>	_	
	4040 West Newberry Road, Suite 950B				
	Gainesville , FL	3260	7	_ 66	
				6 JAN - 7 CRETARY EAHASSEE	
(b)	Enter name of NEW Registered Agent and/or NEW Registered			- ASS	e parties
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	OFF C	Çesaldî Ç
	The Hallmark Companies, Inc.				Differences
	NEW Registered Office Address:				E-PRIME Diseased
	4040 West Newberry Road, Suite 950B				
	Gainesville	3260	7		
			· · · · · · · · · · · · · · · · · · ·	_	
the cha agent w was/we	imited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reg ibility of f the lin limited	istered offic company, it i mited liabili	ce and the business office of the re is hereby confirmed that the chang ity company or as otherwise provid- ompany.	gistered ge(s)
Signat	rure of a member or authorized representative of a member			Printed or typed name of signee	
I herel provisi the obli to mere notified	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as providedly reflect a change in the registered office address, I lid in writing of this change.	ee to ac perforr t for in vereby	ct in this cap nance of my Chapter 60 confirm that	nacity I further agree to comply y	vith the d accept ng filed been

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00