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(Requestor's Name)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	
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(Document Number)	
Certified Copies , Certificates of Status	_
Charles hastrostians to Filing Officer	٦
Special Instructions to Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Amendment S Division of C	Section orporations			• ,
SUBJECT:	HALLMARK FI	NANCIAL, IN	IC.	
<u> </u>	Name o	f Corporation		
DOCUMENT NUM	BER:PS	900008990	1 .	
The enclosed Stateme	ent of Change of Registered Of	fice/Agent and fe	e are submitt	ted for filing.
Please return all corre	espondence concerning this ma	tter to the follow	ing:	
_	Rhono Name of	la S. Rowe	:	
	Name of s	Contact i Cison	,	
_		FINANCIAL, II	NC.	
	Firm	/Company		
	3731 NE	Pineapple Ave	:	
·	·, A	ddress	. :	
٠			* * .	
	Jensen Re	ach, FL 3495	7	
_	City/State	and Zip Code		
	dawnginter@i	renarhomes.co	om	
E	-mail address: (to be used fo	r future annual	report notifi	cation)
			•	
For further information	on concerning this matter, pleas	se call:	•	
Rh	onda S. Rowe	at (772	2 \ .	692-7800
	of Contact Person	Area C	ode & Daytir	ne Telephone Number
Enclosed is a \$35.00	check made payable to the Dep	partment of State.	· '	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Cli 266	eet Address: nendment Se vision of Co fton Buildin 61 Executive llahassee, FI	rporations ig c Center Circle

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0 inge is submitted for a corporation org r to change its registered office or regi	anized under the laws of th	e State of Flo	rida	· 	-
1. The name of t	the corporation: HALLMARK F	INANCIAL, INC	·	·		
2. The principal	office address: 3731 NE Pineapp	ple Ave				
	Jensen Beach, I	FL 34957				
3. The mailing a	ddress (if different):					
4. Date of incorp	poration/qualification:	Document number	: P99	000089	3 901	
	street address of the current registered tment of State: (If resigned, enter resigned)		e on file with th	ne		
	M. Lanning Fox.		·			
	3473 SE Willoughby Blvd					
•	Stuart, FL 34994	·		Libra .		•
6. The name and (if changed):	street address of the new registered ag	gent (if changed) and /or re	gistered office	SUBELLET ALL AHIJSEN	10 JUN 22	
	3731 NE Pineapple Ave			五二	AM II:	Ö
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	P.O. Box 1	NOT acceptable				
	Jensen Beach, FL 34957	<u> </u>		関係	F	,
	ess of its registered office and the stre be identical. as authorized by resolution duly adop ne board, or the corporation has been				agen	it,
aumorized by the	e board, or the corporation has been	notified in writing of the c	mange.			
Signatur	re of an officer or director		n Doss, Jr. ed name and title			-
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent to comply with the provisions of all si ad I am familiar with and accept the a ing filed merely to reflect a change in s been notified in writing of this chan	and agree to act in this ca tatutes relative to the prop bligation of my position a the registered office addr ge.	pacity ier and comple is registered a ess, I hereby c	ete perfo gent. Oi onfirm i	rman r, if th that th	ce iis he
<u>Us</u>	nature of Registered Agent	6-10	oate ·			-
_	half of an entity:	•				
	Arden Doss, Jr.					
		FEE: \$35.00 * * *	!			