## 103000010087

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: MPERIAL BONE VALLEY GEM, MINERAL AND FOSSIL (Name of corporation) SOCIETY, INC.
DOCUMENT NUMBER: NO 30000 100 87
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of contact person)
IMPERIAL BONE YALLEY GEM, MINERAL AND FOSSIL SOCIETY, INC. (Firm/Company)
510 SHALISA BLYD. (Address)
AUBURN DALE FL. 33823 (City/state and zip code)
For further information concerning this matter, please call:
TVANITA BERGFIELD at (863) 967 7745  (Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida.  in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ## IMPERIAL BONE VALLEY GEM, MINERAL AND  FOSSIL SOCIETY, INC.
2. The principal office address: FOSSIL SOCIETY, INC.
5137 N. SCENIC HWY. LOT 32 LAKE WALES, FL. 33898-1098
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: NOVEMBER 12, 2003  Document number: NO 3000010087
<ol><li>The name and street address of the current registered agent and registered office on file with the Florida Department of State:</li></ol>
ALLISON WILSON
5137 N. SCENIC HWY. LOT 32
LAKE WALES, FL. 33898-1098
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
TUANITA BERGFIELD
TIO SHALISA BLVD.  (P.O. Box NOT acceptable)
(P.O. Box NOT acceptable)
AUBURNOME, FL. 33823
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer of director)  CHARLES APPENZELLER PRESIDENT (Printed or typed name and title)  PRESIDENT
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent)  (Date)
If signing on behalf of an entity:
JUANITA BERGFIELD (Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*