NATIONAL SPELEOLOGICAL SOCIETY, INC.

affiliated with the American Association for the Advancement of Science

Cave Diving Section N04164

1-25-00

IN REGARDS TO YOUR CETTER

NUMBER: 099A 000 60679

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TELEPHONE NUMBER IS

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NATIONAL SPELEOLOGICAL SOCIETY, INC.

affiliated with the American Association for the Advancement of Science

CAVE DIVING SECTION

• Benford, Florida 32002-0930 TALLAHASS EE

Dedicated to the exploration, study, and conservation of caves



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 30, 1999

CAVE DIVING SECTION OF THE NATIONAL SPELELOGICAL Post Office Box 38057 Tallahassee, FL 32315

SUBJECT: CAVE DIVING SECTION OF THE NATIONAL SPELEOLOGICAL

SOCIETY, INC.

Ref. Number: N04164

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The fee to file your document is \$35.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6910.

Letter Number: 099A00060679

Louise Flemming-Jackson Corporate Specialist Supervisor

PO BC X 38057 Brandout, Harida 2000-09950 BER(S), (if known): BER(S),	NATIONAL SPELEOLOGICAL SOCIETY, INC. affiliated with the American Association for the Advancement of Science CAVE DIVING SECTION			.	Office Use Only			
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CR2E031(1/95)

ADDRESS CIMUGE ONLY

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,
the undersigned corporation organized under the laws of the State of Flonda
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida. 1. The name of the corporation is: Care Diving Section OF THE NATIONAL
1. The name of the corporation is:
SPELEOLOGICAL SOCIEM, INC.
2. The mailing address of the corporation is: $Po R > 38057$
Tallahassee FL 32315-8657
Tallahassee FL 32315-8657 3. Date of incorporation/qualification: 07/13/1984 Document number: =NO 4164
4. The name and address of the current registered agent and office:
Bruce M. Ryan
5380 Grove Valley Rd
Tallahassee FL 32303
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Bruce M. Ryan
1932 Oven; word Dr.
Tallahacree FL 32303
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.
Shahu Come 12/18/1956 5: (Signature of an officer, chairman or vice chairman of the board) (Date)
STEPHEN C. DRMEROID
(Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, 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.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
BRUCE M. RYAN ADMIN. MANAGER
(Typed or Printed Name) (Capacity)
* * * TO INC EFE. \$25.00 * * *

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