P950008a978

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

February 24, 1998

Timothy D. Nicks 5333 Skylark Ct. Jacksonville, FL 32257

SUBJECT: BORE TECH, INC. Ref. Number: P95000082978

300002452683--9 -03/10/38--01008--021 *****35.00 ******35.00

We have received your document for BORE TECH, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file your document is \$35.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6901.

Susan Payne Senior Section Administrator

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Chanse
SP 319198

CORarachg

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

•	provisions of sections 607.0502, 617.0502, 607 poration organized under the laws of the State o	
	wing statement in order to change its registered	
State of Florida.		
1. The name of t	he corporation is: Bore Tech, Inc.	
		The state of the s
2. The mailing a	ddress of the corporation is: 5333 Skylark	Ct., Jacksonville, Florida 32257
3. Date of incor	poration/qualification: 10/30/1995 I	Occument number: P95000082978
4. The name and	address of the current registered agent and office	2 :
	The Law Firm of Lawrence J. Spiege	il Chrtd
-		-
-	343 Almeria Avenue	
e 201	Coral Gables, Florida 33134	P. O. Box Not Acceptable) P. O. Box Not Acceptable) P. O. Box Not Acceptable)
5. The name and	l address of the new registered agent and office: (P. O. Box Not Acceptable)
	Timothy D. Nicks	
-	5333 Skylark Ct.	
_	Jacksonville, Florida 32257	
The street addreagent, as change	ess of its registered office and the street addressed, will be identical.	s of the business office of its registered
Such change wa authorized by the	as authorized by resolution duly adopted by its ne board.	board of directors or by an officer so
- Vesion	other D. Niels	2-18-98 (Date)
(Signature	of an efficer, chairman or vive chairman of the board)	(Date)
Timoth	y D. Nicks, President	
	(Printed or typed name and title)	(Date)
corporation, I h I fürther agree	med as registered agent and to accept service vereby accept the appointment as registered age to comply with the provisions of all statutes release my duties, and I am familiar with and accept to t.	ent and agree to act in this capacity. ative to the proper and complete
Viena	Hu D. Nielna ignature of Registered Agent)	2-18-98
(S	ignature of Registered Agent)	(Date)
If signing on behal	figurature of Registered Agent) If of an entity: Paige O. Ni UKS / Sec Typed or Printed Name)	retary
	Typed or Printed Name)	(Capacity)

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