

MD1551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

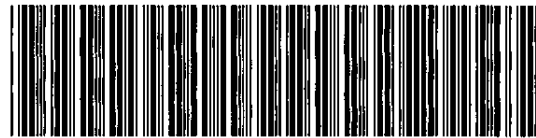
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700106677007

*RA Charge  
Tewis*

07/30/07--01033--008 \*\*35.00

FILED  
2007 JUL 30 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



May 24, 2007  
7-26

Division of Corporations  
Florida Department of State  
Clifton Building  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Capt. Crab's Take-Away of 79<sup>th</sup> Street, Inc.

Dear Filing Officer:

Please file the attached change of agent form for the referenced company. Enclosed please find a check for the requisite fees. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,

A handwritten signature in cursive script that reads "Tanya Dietrich".

Tanya Dietrich  
Senior Corporate Specialist

Encl.



## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Capt. Crab's Take-Away of 79th Street, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** M01551

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:

Tanya Dietrich

(Name of Contact Person)

National Corporate Services, LLC

(Firm/Company)

16055 Space Center Blvd., Suite 235

(Address)

Houston, Texas 77062

(City/State and Zip Code)

For further information concerning this matter, please call:

Tanya Dietrich

(Name of Contact Person)

at ( 800 ) 862-5438

(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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: Capt. Crab's Take-Away of 79th Street, Inc.
2. The principal office address: 1510 West Loop S, Houston, TX 77027
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 6/8/84 Document number: M01551

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System

1200 South Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.

2731 Executive Park Drive, Suite 4

(P.O. Box NOT acceptable)

Weston, FL 33331

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.

Denise Bell  
(Signature of an officer or director)

Denise Bell, Vice President

(Printed or typed name and title)

*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.*

Victor Alfano  
(Signature of Registered Agent)

7/25/07  
(Date)

If signing on behalf of an entity:

Victor Alfano, Vice President

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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