F0400006284

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AND ANASSEF, FLORIDA

Charles No

COVER LETTER

TO: Amendment Section Division of Corporations	r			
SUBJECT: Sur La Table, Inc. (Name of Corpo	pration)			
DOCUMENT NUMBER: F04000006284				
The enclosed Statement of Change of Registered Office/As	gent and fee are submitted for filing.			
Please return all correspondence concerning this matter to t	he following:			
Loretta McCool				
(Name of Contact Person)				
Unisearch, Inc.	any)			
(
PO Box 12054				
(Address)				
Salem, OR 97309-0054 (City/State and Z				
, ,	ip Code)			
For further information concerning this matter, please call:				
Loretta McCool (Name of Contact Person)	t (800) 554-3113, ext. 1010 (Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Departmen	nt of State.			
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

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

statement of c	hange is submitted for a corporation or	.0502, 607.1508, or 617.1508, Florida Staterganized under the laws of the State of <u>W</u> egistered agent, or both, in the State of Flor	ashington
1. The name o	of the corporation: Sur La Table, Inc) <u>.</u>	
		uth, Suite 486, Seattle, WA 98108-2	514
3. The mailing	g address (if different):		
4. Date of ince	orporation/qualification: 11/01/2004	Document number: F0400000	06284
	and street address of the current register partment of State:	red agent and registered office on file with	the
	HIQ Corporate Services,	Inc.	
	1574 Village Square Blv	vd, Suite 100	
	Tallahassee, FL 32309		1 A S
6. The name a (if changed		agent (if changed) and /or registered office	ASSE ASSE
	2731 Executive Park Dr	rive, Suite 4	
	Weston, FL 33331		STE ATE
		treet address of the business office of its r	
Such change authorized by	was authorized by resolution duly ad the board, or the corporation has bee	opted by its board of directors or by an or on notified in writing of the change.	fficer so
Susan	nature of an officer or director)	L. Susan Faw, Secretary	c)
		nt and agree to act in this capacity. I statutes relative to the proper and comp e obligation of my position as registered in in the registered office address, I hereby ange.	lete performance agent. Or, if this confirm that the
NRAI Service	Signature of Registered Agent)	February 14, 2006	
If signing on	behalf of an entity:	, .	
	McCool, Assistant Secretary		

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

(Typed or Printed Name)