## M01550

(Re	equestor's Name)				
(Ac	ldress)				
- (Ad	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
<b>(</b> Bı	ısiness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



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May 24, 2007

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

RE: Crab House, 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,

Tanya Dietrich

Senior Corporate Specialist

Encl.

## **COVER LETTER**

TO:	TO: Amendment Section Division of Corporations				
SUBJECT: Crab House, Inc.  (Name of Corporation)					
DOCUMENT NUMBER: M01550					
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)					
	(Ivalie of Collact Leison)				
National Corporate Services, LLC					
(Firm/Company)					
16055 Space Center Blvd., Suite 235 (Address)					
	•				
	Houston, Texas 77062				
(City/State and Zip Code)					
For fu	ther information concerning this matter, please call:				
	Tanya Dietrich at ( 800 ) 862-5438 (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

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

statement of cha	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida S organized under the laws of the State of <u>f</u> egistered agent, or both, in the State of Fl	Florida .			
	the corporation:	Crab House, Inc.				
	2. The principal office address: 1510 West Loop S, Houston, TX 77027					
3. The mailing a	address (if different):		7.00000			
4. Date of incor	poration/qualification: 6/8/84	Document number: M0155	50			
5. The name and		red agent and registered office on file wit	h the			
	CT Corporation System		7001 TASE			
	1200 South Pine Island Ro	oad	CARE I			
	Plantation, FL 33324	·	ARY OF SSEE			
6. The name and (if changed):	d street address of the new registered	agent (if changed) and /or registered offi	TILL 30 AH 8: 16 2001 JUL 30 AH 8: 16 SECRETARY OF STATE TALLAHASSEE, FLORIDA			
	NRAI Services, Inc.					
2731 Executive Park Drive, Suite 4						
(P.O. Box NOT acceptable)						
	Weston, FL 33331	F-41	•			
The street addras changed will	ess of its registered office and the silbe identical.	treet address of the business office of its	s registered agent,			
Such change wauthorized by t	as authorized by resolution duly ad he board, or the corporation has bee	lopted by its board of directors or by an en notified in writing of the change.	officer so			
(Signat	Jenise Bell ure of an officer or director)	Denise Bell, Vice Presiden				
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered age; to comply with the provisions of all nd I am familiar with and accept the ing filed merely to reflect a change s been notified in writing of this cha	nt and agree to act in this capacity. I statutes relative to the proper and com e obligation of my position as registered in the registered office address, I hereb ange.	plete performance I agent. Or, if this by confirm that the			
Vieto -	gnature of Registered Agent)	7/25/07 (Date)				
	chalf of an entity:	(Date)				
Victor Alfa	ano Vice President					

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

(Typed or Printed Name)