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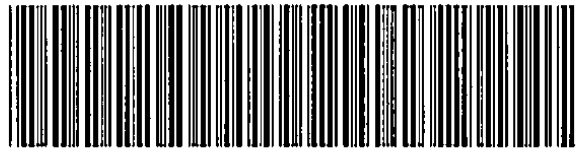
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **CRAFTY CRAB DALE MABRY INC**

Name of Corporation

DOCUMENT NUMBER: **P19000054923**

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHU ZHEN OUYANG

Name of Contact Person

CRAFTY CRAB DALE MABRY INC

Firm/Company

14391 N DALE MABRY HWY

Address

TAMPA, FL 33618

City/State and Zip Code

YVONNEYANCPA@GMAIL.COM

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

YVONNE YAN

Name of Contact Person

at (**407**) **250-4858**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

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

ARTICLES OF CORRECTION

For

CRAFTY CRAB DALE MABRY INC

Name of Corporation as currently filed with the Florida Dept. of State

P19000054923

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct ARTICLE OF INCORPORATION

(Document Type Being Corrected)

filed with the Department of State on JULY 01, 2019

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

OFFICER (PRESIDENT - "TITLE P") FIRST NAME SPELLING ERROR

OUYANG, ZHU ZHEN

Correct the inaccuracy, incorrect statement, or defect:

OUYANG, SHU ZHEN



(Signature of a director, president, or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court-appointed fiduciary, by that fiduciary.)

SHU ZHEN OUYANG

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00

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