Rage 1 of 1 Division of Comoration

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000083765 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

División of Corporations

Fax Number : (850)205-0383

From:

Account Name : OUTBACK STEAKHOUSE

Account Number : 072731001666

Phone

: (813)282-1225

Fax Number

: (813)261-2114

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION

CIGI VIRGINIA SERVICES, LTD

| Certificate of Status | 1 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$113.75 |

Electronic Filing Menu

Corporate Filing Menu

Help

3/30/2007

COVER LETTER

| | TO: Registration Division of | n Section Corporations | | | | |
|---|--|---|--|---|--|--|
| | | I Virginia Servic | | | | |
| | (Name | (Name of Florida Limited Partnership or Limited Liability Limited Partnership) | | | | |
| | The enclosed Cert | The enclosed Certificate of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: | | | | |
| | Please return all co | | | | | |
| | | | e de se de la companya de la company | } . | | |
| All Control of the second | Ariane McQue | een. | | | | |
| 10 m | | (Contact Person) | Try control of the | | | |
| Commission of the state of the | OSI . | | " | | | |
| | • | (Firm/Company) | service (140 lb) mile and Annual Annual (140 lb) | | | |
| in a factor of the second | 2202 N West | Shore Blvd., 5th | Floor Control | A STATE ASSESSED | | |
| `. | | (Address) | | | | |
| • • | Tampa, FL 33 | 3607 | | · | | |
| and the same of the same | | (City, State and Zip Code) | | | | |
| • | For further informs | For further information concerning this matter, please call: | | | | |
| | Ariane McQue | en | at (813) 28 | 32-1225 | | |
| | (Name of Co | ntact Person) | | Daytime Telephone Number) | | |
| | Enclosed is a check | for the following am | ount: | | | |
| | \$52,50 Filing Fee | 561.25 Filing Fee and Certificate of Status | S105.00 Filing Fee and Certified Copy | S113.75 Filing Fee, Certified Copy, and Certificate of Status | | |
| | STREET ADDRESS: Registration Section | | MAILING ADDRESS: Registration Section | | | |
| ! | | | | | | |
| | Division of Corpor. | ations | | Corporations | | |
| | Clifton Building | A | P. O. Box 63 | | | |
| | 2661 Executive Cer Tallahassee, FL 32 | | Tallahassee, | FL 32314 | | |

Certificate of Status (optional):

 $\label{eq:continuous} \mathcal{A}_{i} = \{ (i,j) \in \mathcal{A}_{i} : i \in \mathcal{A}_{i} \}$

CERTIFICATE OF AMENDMENT CERTIFICATE OF LIMITED PARTNERSHIP OF

FILED 07 APR -2 AM 9: 17 SECRETARY OF STATE TALLAHASSEE, FLORIDA

| | ** | , LOKIDA |
|---------------------------------------|---|---|
| | CIGI Virginia Services, Ltd | |
| | (Insert name currently on file with Florida Department of State) | - |
| | Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 2/2/2007, adopts the following | |
| | certificate of amendment to its certificate of limited partnership. | |
| • | FIRST: Amendment(s): (Indicate information being amended, added, or deleted) | and the second second |
| · · · · · · · · · · · · · · · · · · · | The name will change to: | <u>-</u> |
| | CIGI Virginia Services, Limited Partnership | |
| • • • • • • | Clost Virginia Services, Limited Partitership | - Programme of the second |
| • • | | <u> </u> |
| | | |
| | | - · · · · · · · · · · · · · · · · · · · |
| | | _ 1 |
| C I T Ta | <u> </u> | |
| | SECOND: Effective date, if other than the date of filing: upon filing | |
| | (Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.) | |
| | Signature(s) of a general partner(s)*: (*Note: If adding or deleting an election to be a limited liability limited partnership statement, all general partners must sign the amendment.) | |
| | Joseph V. Kadow, Executive VP: Secretary of | |
| | Christopis Hallangfrill, Inc., sole general Fartner | |
| | Signature(s) of <u>new</u> or <u>dissociating</u> general partner(s), if any: | |
| | Filing Fee: \$52.50 Certified Conv (ontional): \$57.50 | |

\$8.75