## M0200000270

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	usiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
i L.,				

Office Use Only



600218104076

01/17/12--01025--029 \*\*35.00

SECRETARY OF STATE. FALLAHASSEE, FLORIDA

2012 JAN 19 AH 8: 44

J. SAULSBERRY EXAMINER

JAN 20 2012

## **COVER LETTER**

то:	_	on Section of Corporations								
SUBJ	ECT:					Orlando, LLC				
		Name of	Limite	a Liaon	ny C	ompany				
Dear S	Sir or Mada	m:								
The en	closed Reg	gistered Agent/Registered	Office	Change	and	fee(s) are submitted	for	filing.		
Please	return all o	correspondence concerning	g this n	natter to	the f	following:				
		Denise Bell Name of Person								
		realise of reison								
	N	RAI Corporate Service	s		<del></del>					
	16055	Space Center Blvd., St	e. 235		<del></del>			SECRET FALLAHA	2012 JAN 19	77
								ARY OF		
		Houston, TX 77062 City/State and Zip Code			_			STA	14 :8 W	Service and a
		dholl@nrai.com					•	Þ.	44	
E-1	mail address: (	dbell@nrai.com to be used for future annual repor	t notificati	on)	_					
For fu	ther inforn	nation concerning this ma	tter, ple	ase call	:					
	E	enise Bell	at (	800	)	862-543	88			
	Nai	me of Person	\_		Area (	Code & Daytime Telephor	e Nur	mber		
	Registratio Division of Clifton Bui 2661 Exect	Corporations		Reg Div P.O	istrat ision . Box	ion Section of Corporations 6327 see, Florida 32314				
	Enclosed	is a check for the follow	ing am	ount:						
ĺ	<b>√</b> \$25 Fil	ing Fee		<b>\$5</b>	5 Fil	ing Fee & Certified	Cop	ру		

INHS18 (5/08)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	<u>McCorm</u>	mick & Schmick's Orlando, LLC				
2. (a) Principal office address of limited liabil	lity company:	1510 West Loc	op South			
(Note: MUST BE STREET ADDRES	<u>22</u> )	Houston, TX 77027				
(b) Mailing address of limited liability company:		1510 West Loop South				
(Note: MAY BE POST OFFICE BO)	<u>X</u> ) <u>!</u>	Houston, TX 77027				
02/01/02	_	M02000000270	)			
3. Date of filing/registration in Florida	4.	Document number				
5. (a) Registered Agent and Registered Offic	e shown on the	e records of the Florida Dept.	of State:			
Registered Agent:	<u>1</u>	National Corporate Resear	ch Ltd., Inc.			
Registered Office Address:		515 E. Park Ave. Tallahassee, FL 32301				
(b) Enter name of <u>NEW Registered Agent</u> <u>NEW</u> Registered Agent:		Registered Office address: NRAI Services, Inc.				
NEW Registered Agent:  NEW Registered Office Address:		2731 Executive Park Drive, Suite 4				
MUST BE FLORIDA STREET ADD		Weston ,FL3333				
If the limited liability company is not organized confirmed that after the change or changes are and the business office of the registered agent to liability company, it is hereby confirmed that to of the members of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability.  Signature of a member or authorized representative of a member of a member of authorized representative of a member of the limited liability. Signature of a member of authorized representative of a member of the limited liability with the provisions of all statutes relationary of	made, the Flor will be identicated the change(s) way or as otherwaity company.	rida street address of the regis al. Or, in the case of a Florida vas/were authorized by an affinise provided in the articles of AHASSEE. FLORIDA CONTROLLED TO THE PROVIDENCE OF THE PROVIDENCE	stered office a limited irmative vote of signification of the signification of the signification of the significant of the sign			
Signature of Registered Agent Denise Bell, Asst. Secy. Division of Corporations, I	 P.O. Box 6327	. Tallahassee. FL 32314				

**FILING FEE: \$25.00**