Florida Department of State

Division of Corporations Public Access System

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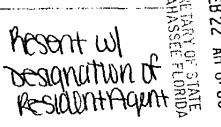
Account Name : OUTBACK STEAKHOUSE

Account Number : 072731001666 Phone

: (813)282-1225

Fax Number

: (813)281-2114



FLORIDA/FOREIGN LIMITED LIABILITY CO.

OSI Restaurant Partners, LLC

Certificate of Status Certified Copy Page Count 01 Estimated Charge \$160,00

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2/21/2008

Electronic Filing Menu

COVER LETTER

SUBJECT: OSI Rostaurant Partners, L	
	(Name of Limited Liability Company)
	gn Limited Liability Company for Authorization to Transact Business in check are submitted to register the above referenced foreign limited as in Florida
Please return all correspondence cor	ncerning this matter to the following:
Ely Hemandez	
	(Name of Person)
OS) Restaurant Partners, L	LLC
	(Firm/Company)
2202 N West Shore Blvd.,	, 5th Floor, Tamps, FL 33607
	(Address)
Tampa, FL 33607	
	(City/State and Zip Code)
for further information concerning t	this matter, please call:
Ely Hernandez	at (813) 282-1225
(Name of Pers	son) (Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building 2661 Executive Center Circle
Tallahassee, Fl. 32314	

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIMITED

	OSI Restaurant Partners, LLC
١.,	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
COL	name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida and attach a copy of the written isent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability mpany," "L.L.C.," "LLC.")
2 1	DE 3. 59-3061413
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	4/23/1991 5. PERPETUAL
,	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	
	(Date first transacted business in Florida, if prior to registration.) (See scutions 608.501 & 608.502 F.S. to determine penalty liability) 2202 N. West Shore Blvd., 5th Fl, Tampa, FL 33607
7.	2202 N. West Shore Blvd., 5th Fl. Tampa, FL 33607
	(Street Address of Principal Office)
8.	If limited liability company is a manager-managed company, check here
9.	The name and usual business addresses of the managing members or managers are as follows.
	See Attached Sheet
	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
	station of the certificate under eath of the translator must be submitted.)
13.	Nature of business or purposes to be conducted or promoted in Florida: Full Skylcl Restaukant
-	
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes
	an affirmation under the penalties of perjury that the facts stated herein are true) A William Allen, III Manager
	Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES. THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Cor	mpany is:		
OS Restaurant Partners, LLC			
If name unavailable, the alternate name to	be used in the state of Florida is:		
2. The name and the Florida street address	ss of the registered agent and office are:	SEC TALL	
Joseph J. Kado	w	FEB 2	
	(Name)	TARY	
	hore Blvd., 5th Floor ddress (P.O. Box NOT ACCEPTABLE)	AM 8: 00 OF STATE OF STATE	
Tampa	FL City/State/Zip	OA E	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signer

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

OSI Restaurant Partners, LLC a Delaware Limited Liability Company

<u>Members</u>

OSI HoldCo, Inc. 2202 N West Shore Blvd., 5th Fl, Tampa, FL 33607

<u>Managers</u>

Chris T. Sullivan	2202 N West Shore Blvd., 5th Fl, Tampa, FL 33607
Robert Basham	2202 N West Shore Blvd., 5th Fl, Tampa, FL 33607
A William Allen, III	2202 N West Shore Blvd., 5th Fl, Tampa, FL 33607
J. Michael Chu	2202 N West Shore Blvd., 5th Fl, Tampa, FL 33607
Mark Verdi	2202 N West Shore Blvd., 5th FI, Tampa, FL 33607
Mark Nunnelly	2202 N West Shore Blvd., 5th Fl, Tampa, FL 33607
Philip Loughlin	2202 N West Shore Blvd., 5th FI, Tampa, FL 33607
lan Blasco	2202 N West Shore Blvd., 5th Fl, Tampa, FL 33607
Andrew Baison	2202 N West Shore Blvd., 5th Fl, Tampa, FL 33607

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OSI RESTAURANT PARTNERS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF FEBRUARY, A.D. 2008.

2260998 8300

080139516

You may verify this certificate online at corp. delaware, gov/authver. whim!

Warriet Smith Hindan

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6374551

DATE: 02-11-08