

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1500009041

**FILED**  
**Feb 15, 2024**  
**Secretary of State**  
**4465470247CC**

**Entity Name:** RARE HOSPITALITY MANAGEMENT, LLC

**Current Principal Place of Business:**

1000 DARDEN CENTER DR  
ORLANDO, FL 32837

**Current Mailing Address:**

1000 DARDEN CENTER DR  
ORLANDO, FL 32837

**FEI Number:** 05-0475499

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK, INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title ASST. SECRETARY  
Name LYONS, COLLEEN HUNTER  
Address 1000 DARDEN CENTER DR  
City-State-Zip: ORLANDO FL 32837

Title VP, SECRETARY  
Name KOREN, LINDSAY L  
Address 1000 DARDEN CENTER DRIVE  
City-State-Zip: ORLANDO FL 32837

Title PRESIDENT, TREASURER, MANAGER  
Name SIMMONS, ANGELA M  
Address 1000 DARDEN CENTER DRIVE  
City-State-Zip: ORLANDO FL 32837

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** COLLEEN H LYONS

**ASST. SECRETARY**

**02/15/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date