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.

(((H13000014742 3)))



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

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : OUTBACK STEAKHOUSE

Account Number : 072731001666

Phone

: (813)282-1225

Fax Number

: (813) 281-2114

Biter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

ieskukalek @ Bloominbrands. com

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION CARRABBA'S/MICHIGAN, LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	1
Page Count	01/
Estimated Charge	\$105.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY EXAMINER 510S 2 2 MAL

https://efile.sunbiz.org/scripts/efilcovr.exe

1/18/2013

Ontpack

COVER LETTER

TO:	Registration Division of C					
SUBJI	SUBJECT: CARRABBA'S/MICHIGAN, LIMITED PARTNERSHIP Name of Florida Limited Partnership or Limited Liability Limited Partnership					
	Ni	ime of Florida Limited Pa	rtnership o	r Limited	Liabilit	y Limited Partnership
The en	closed Certifi	cate of Amendment a	nd fee(s)	are sub	mitted	for filing.
Please return all correspondence concerning this matter to:						
	Karen Davis					
	•	Contact Person				
		Firm/Company			****	
	2202 N V	West Shore Blvd., 5t	h Floor			
	Address					
	Tampa, FL 33607					
,	City, State and Zip Code					
karendavis@Bioominbrands.com E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
			_ai (813	_)	282-1225
	Name of Conta	ct Person	Aı	ea Code	and Dayt	ime Telephone Number
Enclosed is a check for the following amount:						
\$52.5	io Piling Fee	\$61,25 Filing Fee and Certificate of Status		5.00 Pilin wified Co		S113.75 Filing Fee, Certified Copy, and Certificate of Status
	ET ADDRES					ADDRESS:
	egistration Section Registration Section					
	Division of Corporations Division of Corporations Clifton Building P. O. Box 6327					
2661 E	xecutive Cenusee, FL 323					FI. 32314

13 JAN 18 AM 11: 42
TALLAHASSEE, FLORIDA

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Carrabba's/Michigan, Limited Partnership

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 of 10/20/2000, assigned Florida document number 593685730 adopts the following certificate of amendment to its certificate of limited partnership. This amendment is submitted to amend the following: A. If amending usine, enter the new name of the limited partnership or limited liability limited partnership. New name must be distinguishable and contain an acceptable suffix. Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
A. If amending name, enter the new pame of the limited partnership or limited liability limited partnership or limited liability limited partnership or limited liability limited partnership. New name must be distinguishable and contain an acceptable suffix.
New name must be distinguishable and contain an acceptable suffix.
Accountable Limited Partnership suffixer Limited Partnership Limited I.P. 19 or 1td
Acceptable Limited Liability Limited Partnership suffixes. Limited Liability Limited Partnership, L.L.L.P. or LLLP
B. If amending mailing address and/or principal office address, enter new mailing address and/o principal office address here:
New Principal Office Address: (Must be STREET address)
New Mailing Address: (May be post office box)
C. If amending the registered agent and/or registered office address on our records, enter the name of t new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
City , Florida
ing Zip Code

Page 1 of 3

New Registered Agent's Signature, if changing Registered Agent:

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

If Changing Registered Agent, Signature of Nev. Registered Agent

D.	If amending the general partner(s),	enter the name and busi	iness address of each ge	neral partner being
add	ed or removed from our records:			

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>GP</u>	WIBEL GROUP OF MICHIGAN. INC.	581 BENNINGTON BLOOMFIELD HILLS MI 4830	Add Remove
GP	Carrabba's Designated Partner, LLC	2202 N West Shore Blvd. 5th Floor Tampa, FL 33607	Add Remove
	<u></u>	Tampa, FE 33007	Add Remove
************	·		Add Remove
			Add Remove
***************************************	•		Add Remove
E. If the limite limited partner	ed partnership or limited liabilit ship" sizius, enter change here:	y limited partnership is amend	ing its "limited liability
This Limi	ted Partnership hereby elects to be	a "Limited Liability Limited Par	tnership."
This Limi	ted Partnership hereby removes in	s "Limited Liability Limited Part	nership" status.
(NOTE: If adding	or removing" limited liability limited p	artnership" status, all general partner	s must sign this amendment.)

Page 2 of 3

.

	unge(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:	er the date this document is filed by the Florida Department of
State.)	·
Signature(s) of a general partner or all general	narinors*:
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election su	atement. Chapter 620, F.S., requires all general partners to sign
when adding or removing a "limited liability limited parmer	ship" election statement.)
1	
	/-/-
Joseph J. Káďow //	Joseph J. Kadow
Authorized Representative of	Authorized Representative of
Carrabba's Itailian Grill, LLC,	Carrabba's Designated Partner, LLC,
General Partner	General Partner
Signature(s) of all new or dissociating general p	artner(s), if any:
Marchael Mill	
Mark Wibel, President,	

Wibel Group of Michigan, Inc.	
Wellington and the second of t	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	