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D. BRUCE

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EXAMINER

COVER LETTER

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		orporations				
		a's/Heartland-I, Lin Iorida Limited Partnersh	nited Partnership ip or Limited Liability Limi	ted Partnership)		
The enclosed	l Certific	ate of Dissolution an	d fee(s) are submitted f	for filing.		
Please return	all corre	espondence concerni	ng this matter to:			
Karen Day	vis	(Contact Person)				
OSI Resta	aurant	Partners, LLC (Firm/Company)				
2202 N W	est Sh	ore Blvd., 5th Fl	oor			
Tampa, F		7 City, State and Zip Code)	-			
For further in	nformatio	on concerning this m	atter, please call:			
Karen Davis			ut \ 0/0	2-1225	<u>ૂર્</u> જ	
(Name	e of Conta	ct Person)	(Area Code and D	aytime Telephone Numb	● 素	777
Enclosed is a	ı check f	or the following amo	unt:	ASSE	Y-2	=
✓ \$52.50 Filing	g Fee	☐ \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee Certified Copy, and Certificate of Statu		LED
STREET AI	DDRES	S:	MAILING ADDRESS:		m 40 1	
Registration Section		Registration Section		•		
Division of Corporations		Division of Corporations				
Clifton Building		P. O. Box 6327				
2661 Executive Center Circle		Tallahassee, FL 32314				

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

Carrabba's/Heartland-I. Limited Partnership (Name of Florida Limited Partnership or Limited Liability Limited Partnership)
Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 6/18/2002 assigned Florida document number A02000000837, hereby submits this Certificate of Dissolution.
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
No longer doing business
SECOND: A Notice of Dissolution is attached. (Check box if attached.)
THIRD: Effective date, if other than the date of 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.)
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.Sr.
Joseph J. Kadow
Authorized Representative of
Carrabba's Italian Grill, LLC, General Partner Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75