Division of Corporations Public Access System

Electronic Filing Cover Sheet

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(((H080000942273)))



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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

APR 1 4 2008 EXAMINER

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION

OS/USSF-I, LIMITED PARTNERSHIP

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$113.75

Electronic Filing Menu

Corporate Filing Menu

COVER LETTER

TO: Registration Division of C		,			,
	SSF-I, Limited Partne me of Florida Limited Par			Liability	y Limited Partnership)
The enclosed Certifi	cate of Amendment a	nd fee	(s) are subn	nitted	for filing.
Please return all corr	respondence concernir	ng this	matter to:		
Ely Hemandez		<u> </u>		_	
	(Contact Person)				
OSI Restaurant Pa	irtners, LLC				
	(Firm/Company)	tide to test suite to de-		-	
2202 N West Shore	e Blvd 5th Floor				
	(Address)			-	
Tampa, FL 33607	City, State and Zip Code)			-	
(City, State and Aily Code)				
For further informati	on concerning this ma	itter, p	lease call:		
Ely Hernandez		at (813	282	-1225
(Name of Conti	act Person)	(-		and Da	ytime Telephone Number)
Enclosed is a check t	for the following amou	unt:			
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status		105.00 Filing Certified Cop		\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRES	S:		MAIL	NG A	ADDRESS:
Registration Section			Registra	ation S	Section
Division of Corporat	ions				orporations
Clifton Building	0.1		P. O. B		
661 Executive Center Circle Tallahassee, FL 32314					

2008 APR 11 AM 9: 52
SECRETARY OF STATE
TALL ABASSEE FLORINA

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

OS/USSF-I, Limited Partnership		
(Insert name currently on	file with Florida Depart	ment of State)
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certi 3/23/2005, adopts the limited partnership.	ficate was filed with	
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the here:	limited partnership	or limited liability limited partnersh
Acceptable Limited Liability Limited Partnership suffixes B. If amending the registered agent and/or regis	ship, Limited, L.P., LP, Limited Liability Limit tered office address	or Ltd. led Partnership, L.L.L.P. or LLLP.
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes	ship, Limited, L.P., LP, Limited Liability Limit tered office address	or Ltd. led Partnership, L.L.L.P. or LLLP.
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes B. If amending the registered agent and/or regis	ship, Limited, L.P., LP, Limited Liability Limit tered office address	or Ltd. led Partnership, L.L.L.P. or LLLP.
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes B. If amending the registered agent and/or registered agent and/or the new registered off	ship, Limited, L.P., LP, : Limited Liability Limit tered office address ice address here:	or Ltd. led Partnership, L.L.L.P. or I.I.LP. on our records, enter the name of the
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes B. If amending the registered agent and/or registered agent and/or the new registered off Name of New Registered Agent:	ship, Limited, L.P., LP, : Limited Liability Limit tered office address ice address here:	or Ltd. led Partnership, L.L.L.P. or LLLP.

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 Age	ni, Signature of New-Regist		UT)
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Page 1 of 3	A 20 H M A I	APR	7
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Ç.	If amending the genera	il partner(s).	enter the name	and business	address of	each general	partner /	heine
ado	led or removed from our	r records:						

Title	<u>Name</u>	Address	Type of Action
GP	OS USSF, INC.	2002 N West Shore E 5th FI Tampa, FL 33607	Add Remove
<u>GP</u>	OSI/Fleming's, LLC	2002 N West Shore B 5th Fl Tampa, FL 33607	lvd S Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
limited partnersh	partnership or limited liabili nip" status, enter change here: Partnership hereby elects to be:		
This Limited	Partnership hereby removes its	"Limited Liability Limited P	artnership" status.
	r removing" limited liability limited j	·	-
	y other information, enter chan		
			444 555 74,
		· .	77 SE 22
	77	4 . 62	

Page 2 of 3

Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after the State.)	date this document is filed by the Florida Department of
Signature(s) of a general partner or all general part	ners*:
(*NOTE: Only one current general partner is required to sign this removing a "limited liability limited partnership" election stateme when adding or removing a "limited liability limited partnership"	nt. Chapter 620, F.S., requires all general partners to sign
	-
Signature(s) of all new or dissociating general partners	er(s), if any:
A William Altrill, CED & MONOGER 4 OSI MESTALLION TO SUSSELLE (ADRIVERY	A NIIIamanian III, Marager of
KUDAN G2 02 A224 IAR	

\$52.50

\$52.50

Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75

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2008 APR | AM 9: 520TAL P. 05