

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : OUTBACK STEAKHOUSE

Account Number : 072731001666
Phone : (813)282-1225
Fax Number : (813)281-2114

O7 APR 19 PH 3: 02
SECRETARY OF STATE
SECRETARY OF STATE

DISS/TERM/CANCEL/REV OF LP/LLP

FLEMING'S/LOS ANGELES, LIMITED PARTNERSHIP

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

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Corporate Filing Menu

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18/2007

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COVER LETTER

TO: Registratio				
Division of	f Corporations			
SUBJECT: Flemin	g's/Los Angeles, Limited P	artnership		_
(Name	of Florida Limited Partners	ship or Limited Liability Lin	nited Partnership)	
The enclosed Certi	ficate of Dissolution a	and fee(s) are submitted	for filing.	
Please return all co	rrespondence concern	ing this matter to:		
Ariane McQueen				·
	(Contact Person)		£	•
Fleming's/Outback, Jo	pint Venture			
·	(Firm/Company)			•
2202 N West Shore B	lvd., 5th Floor			
	(Address)			
Tampa, FL 33607			•	
	(City, State and Zip Code)	<u> </u>	200
	· · · · · ·			
For further informa	tion concerning this n	natter, please call:	غرر غالت	APR
	•	· -	SS	9
Ariane McQueen (Name of Cor	eta at Parsan\	/	-1225 Daytime Telephone Number)	- 3355]
(149 me at Col	nuci reison)	(Area Code and I		
Enclosed is a check	for the following amo	ount:	OR OR	AH II: 08
□ \$52,50 Filing Fcc	S61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fec, Certified Copy, and Certificate of Status	98
STREET ADDRE	SS:	MAILING	ADDRESS:	
Registration Section		Registration Section		
Division of Corporations			Division of Corporations	
Clifton Building		P. O. Box 6327		

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

Fleming	's/Los Angeles, Limited Par	rtnership	
(Name of Florida Limited	l Partnership or Limited Lia	bility Limited Partnership)	
Pursuant to the provisions of sect partnership or limited liability lin Florida Department of State on 1: Certificate of Dissolution.	nited partnership, whos	e certificate was filed v	with the
FIRST: Reason for dissolution:	(State why partnership	is submitting dissoluti	on)
Entity is no longer in use		<u> </u>	

4-	2		
SECOND: A Notice of Diss (Check box if att		•	
THIRD: Effective date, if other than the	e date of filing:	·	
(Effective date cannot be prior to nor mo Department of State.)		ite this document is filed by	the Florida
Signatures of each general partners. 620.1803(3) or (4), F.S.:	or the person appointe	d pursuant to	
	Josép Tino	oh J. Kadow, VP & Sec. of	
		DINORIONHOORE	ANTENIAR -
Filipa Page	es en		19 ARY SSE
filing Fee: Certified Copy (optional):	\$52.50 \$52.50		OF S
Certificate of Status (optional):	\$8.75		STATE ORDER