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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107

Fax Number

: (561)214-8442

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REGISTERED AGENT CHANGE CIGI FLORIDA SERVICES, LTD

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115. Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. CIGI FLORIDA SERVICES, LTD

Certified Copy (optional): \$52.50

2. <u>01/31/2007</u>	3	A0700000143 Florida document number
Date of	filing/registration in Florida	Florida document number
 The name of Department of S 	he registered agent and the registered office addressate:	ess as shown on the records of the Florida
	Kelly Lefferts	
	Name	
	2202 N West Shore Blvd., 5th Floor	. 27
	Address	72 8
	Tampa, Fl 33607	
	City, State and Zip	7.5
5. The name and	Florida street address of the new registered agent	TALLAHASSEE FLORID
	United Agent Group Inc.	
	Name	
	801 US Highway 1	<u> </u>
	Florida street address (P.O. Box not	acceptable)
	North Palm Beach	FL 33408
	City, State and Zip	
6. Such changet	s) is/are effective when filed by the Florida Depar	tment of State.
ities.	CARRABBA'S FTALIAN GRILL, LEC. Generi By: Adia Myles, Speciai Manager	
Signature of Ger	eral Partner	
comply with the	he appointment as registered agent and agree to operovisions of all statutes relative to the proper and with an accept the obligations of my position as	d complete performance of my duties,
2	Adia Myles, Special Secretary	
<u> </u>		