

A07000000/83

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

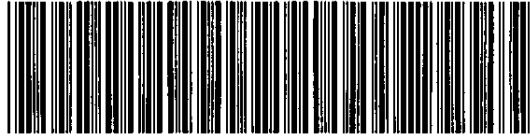
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/03/15--01009--015 **61.25

CLERK OF STATE
TALLAHASSEE, FLORIDA

2015 FEB -3 PM 4:28

FILED

K. SALLY
EXAMINER
FEB 11 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROYS MARYLAND SERVICES, LTD

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Todd Zhang

(Contact Person)

Bloomin' Brands, Inc.

(Firm/Company)

2202 N. Westshore Blvd., Suite 500

(Address)

Tampa, FL 33607

(City, State and Zip Code)

For further information concerning this matter, please call:

Todd Zhang

(Name of Contact Person)

at (813) 380-3036

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$52.50 Filing 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 Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**CERTIFICATE OF DISSOLUTION
FOR**

ROYS MARYLAND SERVICES, LTD

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

FILED
2015 FEB -3 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 February 1, 2007, assigned Florida document number A07000000183, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)

No longer doing business. Sole remaining partner (a general partner) wishes to and consents to
dissolving this partnership.

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.S.:

OS PACIFIC LLC
BY: [Signature]
JOSEPH J. KAROW, EXECUTIVE VP

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