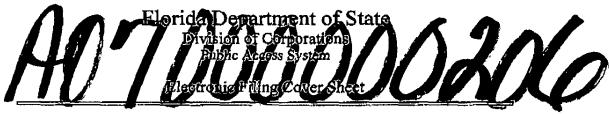
. Division of Corporations



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To:

Division of Corporations

From:

Account Name : OUTBACK STEAKHOUSE

Account Number : 072731001666

Phone : (813)282-1225

Fax Number

: (813)281-2114

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION

CIGI NEW JERSEY SERVICES, LTD

Certificate of Status	1
Certified Copy	1
Page Count	61
Estimated Charge	\$113.75

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: CIGI New Jersey Services, LTD (Name of Florida Limited Partnership or Limited Liability Limited Partnership) The enclosed Certificate of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: ariane mcqueen (Contact Person) OSI Restaurant Partners, Inc. (Firm/Company) 2202 N West Shore Blvd., 5th Floor and Appendix (Address) A Comment of the Comment of (City, State and Zip Code) For further information concerning this matter, please call: Ariane McQueen 813 282-1225
(Area Code and Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: 3105.00 Filing Fcc X \$113.75 Filing Fee, ___ \$52.50 Filing Fee □\$61.25 Filing Fee Certified Copy, and and Certificate of and Certified Copy Certificate of Status **Status** STREET ADDRESS: **MAILING ADDRESS:**

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

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

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

CIGI New Jersey Services	s, LTD	
(Insert name curren	itly on file with Florida Department of	State)
Pursuant to the provisions of section partnership or limited liability limit	ted partnership, whose certificat	c was filed with the
Florida Department of State on 2/1		_, adopts the following
certificate of amendment to its cert	incate of fimited partnership.	
FIRST: Amendment(s): (Indicate	information being amended, ad	ded, or deleted)
The name of the limited partner	ship is to be changed to	
CIGI New Jersey Services, Lim	ited Partnership	
	· · · · · · · · · · · · · · · · · · ·	
The state of the s	1. 32 pr	
	State of the state	
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SECOND: Effective data if other	than the date of films, too 1	RR F
SECOND: Effective date, if other	than the date of flying: har	- 27 &
(Effective date cannot be prior to nor more Department of State.)	e than 90 days after the date this docu	ment is filed by the Florida
Signature(s) of a general partner(s) (*Note: If adding or deleting an election is partners must sign the amendment.)	*: to be a limited Hability limited partner.	ship statement, all general
1/_		
benda I Kada Wallin UBAC	accode at af	
Charles Eddow, essentially	2000	,
Carroldon's Halian Brill, Inc.	general ravener	
Signature(s) of new or dissociating	general partner(s), if any:	
Filing Fee:	\$52.50	
Certified Copy (optional):	\$52.50 \$52.50	
Certificate of Status (optional):	\$8.75	