## 401000000224

(Requ	estor's Name)	_
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(City/S	tate/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Docu	ment Number)	
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Special Instructions to Fili	ng Officer:	1
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Office Use Only



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B. BOSTICK
MAR 2 7 2013

## **COVER LETTER**

TO: Registr								
Divisio	n of C	Corporations						
		homa Services, Limited P Florida Limited Partnershi		Limit	ed Partnership)			
The enclosed C	Certific	cate of Dissolution an	d fee(s) are submi	tted fo	or filing.			
Please return a	il corr	espondence concernir	ng this matter to:					
Karen Davi	s	(Contact Person)	·					
Dia amain Day	l _	•						
Bloomin Bra	anos	, Inc. (Firm/Company)						
2202 N We	st Sh	nore Blvd., 5th Flo	oor			₹.		
		(Address)					13 HAR	
Tampa, FL						3-	75	. 9.
	(•	City, State and Zip Code)					9	, 1 <sup>±</sup>
For further info	ormati	on concerning this ma	atter, please call:			i. f LOF	PH 12: 30	-
Karen Davis			at ( <u>813</u>	/ <u></u>	-1225	<u> </u>	_	
(Name o	f Conta	act Person)	(Area Code	and Da	nytime Telephone	Number	)	
Enclosed is a c	heck f	for the following amo	unt:					
□ \$52.50 Filing F	ee	\$61.25 Filing Fee and Certificate of Status			\$113.75 Fili Certified Copy Certificate of S	, and		
STREET ADI		S:			ADDRESS:			
Registration Se		iono	Registra					
Division of Co Clifton Buildin	•	IOHS	P. O. Be		Corporations			
2661 Executive	_	er Circle			FL 32314			

Tallahassee, FL 32301

## CERTIFICATE OF DISSOLUTION FOR

CIGI Oklahoma Services, Limited Partners			<del></del>
(Name of Florida Limited Pa	artnership or Limited L	iability Limited Partnersh	ip)
Pursuant to the provisions of section partnership or limited liability limited Florida Department of State on 2/1, document number_A07000000224_Dissolution.	ed partnership, who /2007	ose certificate was file , assigne	d with the d Florida
FIRST: Reason for dissolution: (S	State why partnersh	ip is submitting disso	lution)
No longer doing business			
	<del></del>		<del></del>
SECOND: A Notice of Disso (Check box if attack)			
THIRD: Effective date, if other than the c	late of filing:		
(Effective date cannot be prior to nor more Department of State.)	than 90 days after the	date this document is file	d by the Florida
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person appoir	nted pursuant to	
Joseph J. Kadow			****
Authorized Representative of			
Carrabba's Italian Grill, LLC, Ge	 eneral Partner		<del>7</del> 3
Filing Fee:	\$52.50		25
Certified Copy (optional):	\$52.50		Fi
Certificate of Status (optional):	\$8.75		
			$\frac{\mathbb{Z}^2}{2}$ $\omega$