

Document Number Only

A96000000996

C T Corporation System  
Requestor's Name  
660 East Jefferson Street  
Address  
Tallahassee, FL 32301  
City State Zip Phone

200002945152--1  
-07/29/99--01056--011  
\*\*\*\*\*665.00 \*\*\*\*\*35.00

CORPORATION(S) NAME

RAC / KKR / LP Florida, Ltd.

FILED OF STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
99 JUL 29 PM 2:31

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|--|---|--|
| <input type="checkbox"/> Profit                        | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger                    |
| <input type="checkbox"/> NonProfit                     |   |  |
| <input type="checkbox"/> Limited Liability Company     | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark                      |
| <input type="checkbox"/> Foreign                       |   |  |
| <input type="checkbox"/> Limited Partnership           | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other                     |
| <input type="checkbox"/> Reinstatement                 | <input type="checkbox"/> Reservation            | <input checked="" type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Limited Liability Partnership |   | <input type="checkbox"/> Fictitious Name           |
| <input type="checkbox"/> Certified Copy                | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> CUS                       |
| <input type="checkbox"/> Call When Ready               | <input type="checkbox"/> Call if Problem        | <input type="checkbox"/> After 4:30                |
| <input checked="" type="checkbox"/> Walk In            | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up        |
| <input type="checkbox"/> Mail Out                      |   |  |

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Connie

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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7/29

B/K

7/29/99

Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes,  
the undersigned limited partnership organized under the laws of the state of  
Florida, submits the following statement  
in order to change its registered office or registered agent, or both, in the state of  
Florida.

1. The name of the limited partnership is:

RAC/KKR/LP Florida, Ltd.

2. The date of filing/registration in Florida:

May 16, 1996

3. Document number assigned:

A96000000996

4. The name and address of the present registered agent and office:

Nancy Ryan

10800 Biscayne Blvd., Penthouse

Miami, Florida 33161

5. The name and address of the successor registered agent and office.:  
(P.O. Box not Acceptable)

C T CORPORATION SYSTEM

c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida 33324

Such change was authorized by the general partners.

SIGNATURE: Todd E Doyle

General Partner, Koo Koo Roo, Inc.

Date: 7/15/99

By: Todd E. Doyle, Secretary

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF  
PROCESS FOR THE ABOVE STATED LIMITED PARTNERSHIP AT THE PLACE DESIG-  
NATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS  
REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE  
TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER  
AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND  
ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

C T CORPORATION SYSTEM

SIGNATURE: D F Hickey

(Officer)

D. F. Hickey, Assistant Secretary

(Type Name and Title of Officer)

Date: 7-27-99

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

**INHSE 4**

**Filing Fee: \$35.00**