

**F00000003430**

Florida Department of State  
Division of Corporations  
Public Access System

## Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H08000085085 3)))



H080000850853ABC1

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

## To:

Division of Corporations  
Fax Number : (850) 617-6380

## From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5926

**FILED**  
08 APR -3 PM 1:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE****CNL RESTAURANT CAPITAL GP CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

**RECEIVED**  
2008 APR -3 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

**G. Goulet APR 03 2008**

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this  
statement of change is submitted for a corporation organized under the laws of the State of DELAWARE  
\_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CNL RESTAURANT CAPITAL OP CORP
2. The principal office address: 450 SOUTH ORANGE AVENUE, ORLANDO, FL 32801
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 06/16/2000 Document number: F00000003430
5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State:

GOOLJAR, DEVI M

450 SOUTH ORANGE AVENUE

ORLANDO, FL 32801

6. The name and street address of the new registered agent (if changed) and /or registered office  
(if changed):

C T Corporation System

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

(P.O. Box NOT acceptable)

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent,  
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board, or the corporation has been notified in writing of the change.

Carolyn Craft Martin  
(Signature of an officer or director)

CAROLYN CRAFT MARTIN  
(Printed or typed name and title)

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. Or, if this  
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the  
corporation has been notified in writing of this change.

C T Corporation System  
By: Barbara A. Burke  
(Signature of Registered Agent)

4208  
(Date)

If signing on behalf of an entity:

Barbara A. Burke  
Special Assistant Secretary

\_\_\_\_\_  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CK2E045 (8/05)

FILED  
08 APR -3 PM 1:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA