2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 20, 2000 8:00 am Secretary of State DOCUMENT # F98000004304 1. Entity Name MORTON'S OF CHICAGO/BOCA RATON, INC. 03-20-2000 90140 014 ***150.00 Mailing Address Principal Place of Business 350 WEST HUBBARD STREET 350 WEST HUBBARD STREET CHICAGO IL 60610 CHICAGO IL 60610-4098 A0032137 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 58-2434296 Not Applicable Country Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FI 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2F034 (9/99) DVS ☐ Addition TITLE ☐ Delete TITLE Change BALDWIN, THOMAS J NAME NAME 3333 NEW HYDE PARK ROAD, SUITE 210 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NE HYDE PARK NY 11042 Change ☐ Addition TITLE ☐ Delete TITLE BETTIN, JOHN T NAME NAME 350 WHUBBARD ST STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP CHICAGO IL 60610 CASSISTANT Secretary) TITLE Addition Delete TITLE E. Nicholas Wagner NAME NAME 350 W. Hubbard, STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Chicago, IL 60610 Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

E. Nicholas Wagner

3/13/07

34-903-003

Daytime Phone #