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SECRETARY OF STATE

B. KOHR

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EXAMINER



| ACCOUNT NO. : 072100 | 000032 | |
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REFERENCE: 497473 764029

AUTHORIZATION:

COST LIMIT : \$ 25.00

ORDER DATE: March 21, 2008

ORDER TIME : 2:52 PM

ORDER NO. : 497473-001

CUSTOMER NO: 7640296

ARTICLES OF CORRECTION

NAME: OUR FATHER'S PLACE RESTAURANT,

LLC

EFFECTIVE DATE:

XX____ ARTICLES OF CORRECTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX_____ PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace - EXT. 2928

EXAMINER'S INITIALS:

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

| FIRST | ather's | The name of the limited liability Restaurant, LLC | / comp | pany is: | | | | | |
|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|--------|-------------------------------|--------------|--------|--|--|--|
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| | Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Name filed is incorrect. The correct name should be Our Father's Place | | | | | | | | |
| | Restai | urant, LLC | | | FAS | 0 | | | |
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| | <u>OR</u> | | | | OF S | PH 3: | | | |
| | Was de | fectively signed. The manner in ropriate correction are as follows | which | the document was defective | ely signed a | | | | |
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| | | | | 2008 | | | | | |
| Dated: | April | · · · · · · · · · · · · · · · · · · · | , | · | | | | | |
| | | /S:/Florence A. Dougher | | | - | | | | |
| | | Signature of a member or authorized A. Dougherty | orized | representative of a member | | | | | |
| | | Typed or printed name of signee | | | - | | | | |
| | | Filing Fee: Certified Cop | py: | \$25.00 \$30.00 (optional) | | | | | |