> 2000 UNIFORM BUSINESS REPORT (UBR)					APPROVED AND			
DOCUMENT # 12L9900007755					FILED			
1. Entity Name DR. PHILLIPS RESTAURANT MANAGEMENT COMPANY, L.L.				(00 MAY -6 AM II: 26			
					SECRETARY OF S	STATE	i Province	
Principal Place of Business Mailing Address				1,61	LI. AHASSEE, FL	.ORIDA		
211 NORTH LUCERNE CIRCLE EAST ORLANDO FL 32801		211 NORTH LUCERNE CIRCLE EAST ORLANDO FL 32801-3721			+		Name (
2. Principal Place of Business 135 N. Luciant Ciacle East Suite, Apt. #, etc:		3. Mailing Address 4220 Willow BAY DRIVE Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
Suite, Apt.	#, etc.	aulie, Apt. #, etc.			DO NOT WRITE I			
City & Stat		City & State W: JEA GARden	FI	4. FEI Num 59 -	3607472	<u> </u>	oplied For ot Applicable	
Zip. 32801	Country	Zip 34787	Country	5. Certifica	te of Status Desired	See Require		
	6. Name and Address of Current F	legistered Agent	Name A	7. Name ar	nd Address of New Regi			
ALPER, JONATHAN B ESQ. 274 KIPLING COURT HEATHROW FL 32746			Street Address 4110 City Win	s PO Box Num	ber is Not Acceptable)	FL Zip Cod	e-21-7	
8. The above	e named entity submits this statement for the statement for signature, typed or printed the of registered agent are	hatham	registered office or regist		ooth, in the State of Florida	1/1000 /DATE		
	•		OW!!! FEE IS \$50.00 yable to Department	1	1			
9.	MANAGING MEMBE		10.		ADDITIONS/CH			
TITLE Name Street Address Cety-St-Zip	President Louis 5. Chatham, Ja, 431 E. Central Blud., A Orlando, Fl 32801	MCRM pt. 601	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP	Vice Persident M Dian B. Chatham 16433 Sandhill Rd. Winter Garden, Fl 34	GRM Determ	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	0000327 -06/07/00 *****\$0.	□ Change 7:9201- 1-01007-0: 00*******50		
TITLE NAME STREET ADDRESS GITY-ST-ZIP	Manager Paul A. Chatham M 16433 SAUHIII Rd	GR Detecto	NAME STREET ADDRESS CITY-ST-ZIP	2 (22)	The second secon	Change .	Addition	
TITLE NAME 8TREET ADDRESS CITY-8T-ZIP		☐ Deleta	TITLE NAME STREET ADDRESS CITY-ST-ZIP		•	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-GT-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP	·	□ Debate	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
indicated		hat my signature shall have to empowered to execute this records.	he same legal effect as it eport as required by Cha	i made under oa upter 608, Floridi	th: that I am a managing a Statutes.	member or manage	nformation er of the	
		TED NAME OF SIGNING MANAGING I	MEMBER OR MANAGER		Date	Daytime Phone #		