Division of Corporations Electronic Filing Cover Sheet

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(((H170001846803)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

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: (512)418-6949

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Enter the email address for this business/entity to be used for futur annual report mailings. Enter only one mail address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MCCORMICK & SCHMICK ORLANDO, LLC

Certificate of Status	0
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Page Count	96
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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May.

COVER LETTER

	Registration Section Division of Corporations		•	
SUBJE	CT: McCormick & Schmick Orlando, LLC	3		
	Name of Foreig	n Limited Li	ability Comp	any
Dear Sir	or Madam:			
The enc	losed application, certificate and fee(s)	are submitte	d for filing.	
Please re	eturn all correspondence concerning thi	is matter to th	ne following:	
Val Will	iams		٠.	
	Name of Person		el:	
Landry's	, Inc.			
	Firm/Company			
1510 We	est Loop South			
	Address			
Houston,	TX 77027			
	City/State and Zip Code			
VWillian	ns@Ldry.com			
	il address: (to be used for future annual	report notifi	cation)	
For furth Wade M	her information concerning this matter, cDiffen	214	932-3656	
	Name of Person	_ at (de & Davrim	e Telephone Number
	Name of Forson	71100 00		o resoptione reasson
	STREET/COURIER ADDRESS:			NG ADDRESS: ation Section
	Registration Section Division of Corporations			n of Corporations
	Clifton Building		P.O. Bo	x 6327
	2661 Executive Center Circle Tallahassee, Florida 32301		Tallaha	ssee, Florida 32314
\$25 1	d is a check for the following amount Filing Fee \$\begin{align*} \$30 \text{ Filing Fee & } \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	🔲 \$ 55 F	iling Fee & fied Copy	Sectificate of Status & Certificate Copy
CR2E055	(9/15)			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Name of limited liability Company as it appear State: MCCORMICK & SCHMICK ORLANDO		
State: Enter new principal office address, if applicable:	1510 WEST LOOP SOUTH	
(Principal office address MUST BE A STREET ADDRESS)	HOUSTON, TX 77027	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited lie	ability company is: M02000000270	
3. Jurisdiction of its organization: DE		
4. Date authorized to do business in Florida: 2/1/	2002	
SECTION II (5-9 complete only the applicable	changes)	ia.
5. New name of the limited liability company: B (mus	rick House Acquisition FL, LLC st contain "Limited Liability Company, " "L.L.C.," or "LEC.")	.
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.	I for the purpose of transacting business in Florida and affact a maging members adopting the alternate name. The alternate name.	
6. If amending the registered agent and/or registered registered agent and/or the new registered office a	ed officer address on our records, enter the name of the new ddress here:	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Street Address	
	Florida	
	City Florida Zip Code	
the provisions of all statutes relative to the proper and accept the obligations of my position as regis	ent and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with tered agent as provided for in Chapter 605, F.S. Or, If this In the registered office address, I hereby confirm that the limited	

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Attrochard is a postificate if required; no pure than DO days add evidencing the			**************************************	Remove
aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.	aforementioned an	endment(s), duly authenticate	d by the official having custody of record	ds in the
Signature of the authorized representative		1 to 1 to	a of the authorized corresponditive	

Filing Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "MCCORMICK & SCHMICK ORLANDO, LLC", CHANGING ITS NAME FROM "MCCORMICK & SCHMICK ORLANDO, LLC" TO "BRICK HOUSE ACQUISITION FL, LLC", FILED IN THIS OFFICE ON THE TENTH DAY OF JULY, A.D. 2017, AT 6:57 O'CLOCK P.M.



Authentication: 202858164

Date: 07-11-17

:Cy

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

The Certificat	te of Formation of the limited lia	bility company is hereby a
s follows:		
he Name of the	Limited Liability Company is Brick F	louse Acquisition FL, LLC
	S WHEREOF, the undersigned	
	· · · · · · · · · · · · · · · · · · ·	
N WITNESS he 10th	· · · · · · · · · · · · · · · · · · ·	
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State of Dehware
Secretary of State
Division of Corporations
Delivered 06:57 PM 07/10/2017
FILED 06:57 PM 07/10/2017
SR 20175161025 File Number 3484030