

Florida Department of State Division of Corporations

Division of Corporations Public Access System

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(((H05000117490 3)))

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : OUTBACK STEAKHOUSE

Account Number : 072731001666

Phone : (813) 282-1225

Fax Number : (813)202-1209 813-281-2114

Ath: Ariane McQueen

FOREIGN LIMITED LIABILITY COMPANY

Blue Coral Seafood and Wine, LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

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Corporate Filing

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Blue Coral Seafood and Wine,	urc .
	of Limited Liability Company)
	nited Liability Company for Authorization to Transact Business in ick are submitted to register the above referenced foreign limited lorida
Please return all correspondence concerning	ng this matter to the following:
Ariane McQu	een
	(Name of Person)
Blue Coral Seafood and Wine, LL	c
	(Firm/Company)
2202 N West Shore Blvd., 5th Flo	
	(Address)
Tampa, FL 33607	
	(City/State and Zip Code)
For further information concerning this ma	tter, please call:
Ariane McQueen	at (813) 282-1225
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amou	
Enclosed is a check for the following amou	nt.
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Certi	g Fee & \$\Bigsim \\$155.00 Filing Fee & \$\Bigsim \\$160.00 Filing Fee, Certificate ificate of Status & Certified Copy of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 20, 2005

OUTBACK STEAKHOUSE

SUBJECT: BLUE CORAL SEAFOOD AND WINE, LLC

REF: W05000025393

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist FAX Aud. #: H05000117490 Letter Number: 705A00036397



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	(Name of Foreign Limite	d Li	ibility Company)	
Delaware		2	20-2549112	
Jurisdiction unde company is organ	r the law of which foreign limited liabilit	у, У	(FEI number, if applicable)	_
3/24/2005		<	perpetual	
	ate of Organization)	٥.	(Duration: Year limited liability company will cease to exist or "perpetual")	0
na				
	(Date first transacted business in (See sections 608.501 & 608.502 f	Flori	da, if prior to registration.) o determine penalty liability)	_
2202 N West S	hore Blvd., 5th Floor, Tampa, FL 3360	7		
	(Street Addre	ss of	Principal Office)	
If limited liab	ility company is a manager-manage	ed c	ompany, check here 🔽	
The name and	usual business addresses of the ma	anag	ing members or managers are as follows:	
OS USSF, Inc.	. 2202 N West Shore Blvd., 5th Flo	юг,	Tampa. FL 33607	
		_		
			s old, duly authenticated by the official having custody of n	
jurisdiction under		оруі	not acceptable. If the certificate is in a foreign language, a	
jurisdiction under islation of the certi	the law of which it is organized. (A photocolificate under eath of the translator must be su	opy i bmit	s not acceptable. If the certificate is in a foreign language, a ted.)	
jurisdiction under islation of the certi	the law of which it is organized. (A photocolificate under eath of the translator must be su	opy i bmit	not acceptable. If the certificate is in a foreign language, a	
jurisdiction under islation of the certi	the law of which it is organized. (A photocolificate under eath of the translator must be su	opy i bmit	s not acceptable. If the certificate is in a foreign language, a ted.)	
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jurisdiction under Islation of the certi	the law of which it is organized. (A photocolificate under eath of the translator must be sustiness or purposes to be conducted. Signature of a member or an a	opy is brait or p	enotacceptable. If the certificate is in a foreign language, a ted.) romoted in Florida: Restaurant Company orized representative of a member.	-
jurisdiction under islation of the certi	the law of which it is organized. (A photocolificate under eath of the translator must be susiness or purposes to be conducted Signature of a member or an a (in accordance with section 608 08(3),	opy is broit or p	snot acceptable. If the certificate is in a foreign language, a led.) romoted in Florida: Restaurant Company Drized representative of a member. the execution of this document constitutes	
jurisdiction under islation of the certi	the law of which it is organized. (A photocolificate under eath of the translator must be sustiness or purposes to be conducted. Signature of a member or an a	opy is bruit or p	romoted in Florida: Restaurant Company prized representative of a member, the execution of this document constitutes that the facts stated herein are true.)	-

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

I. The name	e of the Limited Liabil	ty Company is:
Blue Coral Se	safood and Wine, LLC	
2. The name	e and the Florida street	address of the registered agent and office are:
	Joseph J Kadow	
		(Name)
	2202 N West Shore	Blvd., 5th Floor
	Florida	reet Address (P.O. Box NOT ACCEPTABLE)
	Tampa	FL 33607
		City/State/Zip
iability comp ngent and ag relating to th	pany at the place design ree to act in this capaci e proper and complete j	ent and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as registered y. I further agree to comply with the provisions of all statutes verformance of my duties, and I am familiar with and accept the ed agent as provided for in Chapter 608, Florida Statutes.

\$ 100.00 Filing Fee for Application
\$ 25.00 Dosignation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

OUTBACK

813 281 2114 P.26

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BLUE CORAL SEAFOOD AND WINE, LLC"

IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF JUNE, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLUE CORAL SEAFOOD AND WINE, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF MARCH, A.D. 2005.



Graniet Smith Hindson Harriet Smith Windson

3944881 8300

050505455

AUTHENTICATION: 3957256

DATE: 06-16-05