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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : OUTBACK STEAKHOUSE
Account Number : 072731001666
Phone : (813) 282-1225
Fax Number : (813) 281-2114

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 11 AM 8:15

LLC DISS/WITH OR REV DISS

BLUE CORAL SEAFOOD AND SPIRITS, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$60.00

J. BRYAN

APR 14 2008

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EXAMINER

RECEIVED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Blue Coral Seafood and Spirits, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ely Hernandez
(Name of Person)

OSI Restaurant Partners, LLC
(Firm/Company)

2202 N West Shore Blvd., 5th Floor
(Address)

Tampa, FL 33607
(City/State and Zip Code)

For further information concerning this matter, please call:

Ely Hernandez at (813) 282-1225
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☒ \$60 Filing Fee, Certificate of Status & Certified Copy

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DIVISION OF CORPORATIONS
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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN
FLORIDA**

Blue Coral Seafood and Spirits, LLC

(Name of limited liability company)

DE

(Jurisdiction of its organization)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.

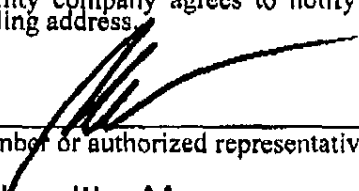
2202 N West Shore Blvd., 5th Floor

(Mailing address)

Tampa, FL 33607

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.


(Signature of member or authorized representative of a member)

A William Allen, III Manager

(Typed or printed name of signee)

Filing Fee: \$25.00

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