Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

Exon:

Account Name : OUTBACK STEAKHOUSE

Account Number: 072731001666

Phone : (813)282-1225

Fax Number : (813) 281-2114

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Cheeseburger Designated Partner, LLC

Certificate of Status	1
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Estimated Charge	\$160.00

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COVER LETTER

TO: Registration Section Division of Corporations	•	
SUBJECT: Cheeseburger Des		
	(Name of Limited Liability Company)	
	preign Limited Liability Company for Authorization to Transact Business, and check are submitted to register the above referenced foreign limit iness in Florida	
Please return all correspondence	concerning this matter to the following:	
Ariane McQue	Partners, Inc. (Firm/Company)	<u>.</u>
	(Name of Person)	1
OSI Restaurant	Partners, Inc.	,
	(Firm/Company)	: `
2202 N West	Shore Blvd., 5th Floor	2
	(Address)	
Tampa, FL 33	607	
	(City/State and Zip Code)	*
For further information concerning	ng this matter, please call:	
Ariane McQueen	at (813) 282-1225	
(Name of	Person) (Area Code & Daytime Telephone Number)	
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the follow ☐\$125.00 Filing Fee ☐3	ving amount: 130.00 Filing Fee & Status Certificate Certificate of Status Certified Copy of Status & Certified	

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:

Cheeseburger Designated Partner, LLC	ited Liability Company)
(Name of Poreign Limi	• •
2 Delaware	3. 20-8475937
(Jurisdiction under the law of which foreign limited liabil company is organized)	lity (FEI number, if applicable)
2/14/07	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
, n/e	
(Date first transacted business i (See sections 608.501 & 608.502	in Florida, if prior to registration.) 2 F.S. to determine penalty liability)
2202 N West Shore Blvd., 5th Floor, Tampa	a, FL 33607
(Street Add	ress of Principal Office)
(2.2.2.1.2.2	
. If limited liability company is a manager-mana	
Cheeseburger In Paradise, LLC	
2202 N West Shore Blvd., 5th Floor, Tampa,	FL 33607
	n 90 days old, duly authenticated by the official having custody of records in ocopy is not acceptable. If the certificate is in a foreign language, a submitted.)
1. Nature of business or purposes to be conducted	d or promoted in Florida: Full Service Restaurants
\sim 1	
(In accordance with section 608,408)	authorized representative of a member. (3), F.S., the execution of this document constitutes (perjury that the facts stated herein are true.)
,	and the state of t

Typed or printed name of signee

Delaware

PAGE 1

The First State

I. HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHEESEBURGER DESIGNATED PARTNER, 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 TWENTIETH DAY OF FEBRUARY, A.D. 2007.

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

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5445325

DATE: 02-20-07

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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.

Cheeseburger Design	ated Partner, LLC	
2. The name and the Florida	s street address of the registered agent and office are	
Joseph J	Kadow	CRETE TE
	(Name)	ARY O
2202 N W	Vest Shore Blvd., 5th Floor	Ho E
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	9: 0
Tampa	FT 33607	वृत्ति ज
Tumpa	PL 00001	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Rignature)

1. The name of the Limited Liability Company is:

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