## 28/0000010M

· · ·			
-	(Requestor's Name)		
· *	(Address)		
	(Address)		
	(City/State/Zip/Phone #)		
PICK-U	P WAIT MAIL		
	(Business Entity Name)		
	(Document Number)		
•	(Document Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

Office Use Only

G. MCLEOD

JUN 18 2010

EXAMINER



300181525013

06/17/10--01036--002 \*\*25.00

FILED

10 JUN 17 PH 12: 19

SECRETARY OF STATE
AND ASSEE, FLORIC



2202 N. West Shore Blvd. 5th Floor Tampa, FL 33607

813.282.1225

June 11, 2010



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

Re: Withdrawal

Dear Sir or Madam:

Enclosed is the Application by Foreign Limited Liability Company for Withdrawal of Authority to Transact Business in Florida for the following entity.

ARRABBA's

Cheeseburger Kansas Designated Partner, LLC

Also enclosed is a check in the amount of \$25.00 made payable to Florida Dept of State for the filing fee.

Please return evidence of the filings it in the pre-paid envelope provided

If you should have any questions, or need any further information, please feel free to contact me at 813-282-1225.

Sincerely,

Karen Davis

Legal Assistant =

Enclosures

CC:

Julie Skukalek



Division of Corporations	
SUBJECT: Cheeseburger Kansas Designated F	Partner II C
(Name of Foreign Limite	
•	
Dear Sir or Madam:	, L
The enclosed withdrawal and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the	ne following:
Karen Davis	
(Name of Person)	<del></del>
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:	
Karen Davis at (8	13 282-1225 x1393
` <u> </u>	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:

Registration Section

□ \$30 Filing Fee & Certificate of Status

☐ \$55 Filing Fee & Certified Copy :

□ \$60 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

Cheeseburger Kansas Designated Partner, LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
M07000001889	
(Florida Document Number)	<del></del>
This limited liability company is no longer transacting business in Florida an authority to transact business in this state.	nd surrenders its
This limited liability company revokes the authority of its registered agent to a its behalf and appoints the Department of State as its agent for service of procause of action arising during the time it was authorized to transact business in F	ccept service on ocess based on a lorida.
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 change in its mailing address.	ne future of any
Flich	
(Signature of member or authorized representative of a member)	
Steven Overhoit, Authorized Representative	in it
(Typed or printed name of signee)	AHASE JUN T

Filing Fee: \$25.00