2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000092035

Entity Name: LP RESTAURANTS, LLC

Current Principal Place of Business:

6900 TAVISTOCK LAKES BLVD.

SUITE 200

ORLANDO, FL 32827

Current Mailing Address:

6900 TAVISTOCK LAKES BLVD.

SUITE 200

City-State-Zip:

ORLANDO, FL 32827 US

FEI Number: 80-0834931 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL REGISTERED AGENTS, INC. 1200 S PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PETER F. SOUZA, ASSISTANT SECRETARY

Electronic Signature of Registered Agent

03/27/2024 Date

FILED Mar 27, 2024

Secretary of State

3752877701CC

Authorized Person(s) Detail:

Title VP Title VP, SECRETARY

Name THAKKAR, RASESH Name RENCORET, MICHELLE R.

Address 6900 TAVISTOCK LAKES BLVD. Address 6900 TAVISTOCK LAKES BLVD.

SUITE 200 SUITE 200

ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32827

Title VP Title P

Name BEUCHER, NICHOLAS F III Name COLLIN, T CRAIG

Address 6900 TAVISTOCK LAKES BLVD. Address 6900 TAVISTOCK LAKES BLVD.

SUITE 200 SUITE 200

City-State-Zip: ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32827

Title VP Title VPT

Name WEAVER, BENJAMIN A Name BYRNES, DANIEL R

Address 6900 TAVISTOCK LAKES BLVD - STE. Address 6900 TAVISTOCK LAKES BLVD.

SUITE 200

City-State-Zip: ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32827

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BENJAMIN A. WEAVER

VICE PRESIDENT

03/27/2024