

No. W 98017	Due no later than Nov 30, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. TDM FRANCHISING, LLC VIN MEROLA RE: TDM FRANCHISING, LLC 325 SUB WAY MILFORD CT 06461-3072		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	DAVID S WORROLL	325 SUB WAY	MILFORD	CT	USA	06461-3072
5. Organized Under the Laws of: DE W 98017		6. Annual Report must be signed.* Signature: DAVID S. WORROLL Name (type or print): DAVID S. WORROLL		Date: 11/17/2017 Title: MANAGER		
Processed 11/17/2017		* Electronically provided signatures are accepted as original signatures.				