No. <b>W 168316</b>		Due no later than Jun 30, 2017 Annual Report Form  1. Mailing Address: Correct in this box if needed.  BENZER FRANCHISING LLC 5908 BRECKENRIDGE PKWY TAMPA FL 33610		2. Registere	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				784 S CLE POST FAI	REGISTERED AGENTS INC 784 S CLEARWATER LOOP STE R POST FALLS ID 83854  3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of a	least one Member or Manager					
Office Held	Name	Thes and Addresses of a	Street or PO Address	City	State	Country	Postal Code	
MEMBER	MEMBER ALPESH PATEL		5908 BRECKENRIDGE PKWY	TAMPA	FL	USA	33610	
5. Organized Under the Laws of:  RL  W 168316		6. Annual Report must be signed.* Signature: Alpesh Patel Name (type or print): Alpesh Patel			Date: 09/20/2017 Title: Member			
Processed 09/20/2017 * Electronically provided signatures are accepted as original signatures.								