No. <b>W 25745</b>		Due no later than Sep 30, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  ARAMARK FHC CAMPUS SERVICES, LLC LUCY KLINE 1101 MARKET ST		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
NO FILING FEE IF RECEIVED BY DUE DATE		ARAMARK TOWER PHILADELPHIA PA 19107		3. <u>New</u> Registered Agent Signature:*			
		mes and Addresses of a	it least one Member or Manager.	C'h	Chata	C	De etel Ce de
Office Held MEMBER	Name MARK NELS	ON	Street or PO Address 1101 MARKET ST ARAMARK TOWER	City PHILADELPHIA	State PA	Country	Postal Code 19107
MEMBER	PATRICIA R		1101 MARKET STREET ARAMARK 1101 MARKET STREET ARAMARK TOWER	PHILADELPHIA	PA	USA	19107
MEMBER	JAMES TARA	ANGELO	1101 MARKET STREET ARAMARK TOWER	PHILADELPHIA	PA	USA	19107
MEMBER	ARAMARK F	HC, LLC	1101 MARKET STREET	PHILADELPHIA	PA	USA	19107
5. Organized Under the Laws of: 6		6. Annual Report mus					
DE W 25745		Signature: LUCY KLINE Name (type or print): LUCY KLINE		Date: 10/18/2017 Title: Licensing Specialist			
Processed 10/18/201	17	* Electronically provide	d signatures are accepted as original sign	natures.			