No. W 160222		Due no later than Dec 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TABLETOP MEDIA, LLC 12404 PARK CENTRAL DRIVE SUITE 350 DALLAS TX 75251		BOISE ID 83705 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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	BENSON SHAPIRO		C/O HARVARD BUSINESS SCHOOL 80 THOREAU STREET	CONCORD	MA	USA	01742-2409
MANAGER	MARK MITCHELL		C/O DFB PHARMACEUTICALS 3909 HULEN STREET	FT. WORTH	TX	USA	76107
MANAGER	MAXWELL LE	EA .	C/O DFB PHARMACEUTICALS 3909 HULEN STREET	FT. WORTH	TX	USA	76107
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
5. Organized Under the Laws of:			Debes 44 /00/2016				
ID W 160222		Signature: Kelly Lettn Name (type or print):	Date: 11/09/2016 Title: POA				
Processed 11/09/2016 * Electronically provided signatures are accepted as original signatures.							