

|   |                        |  |              |   |         |             |  |
|---|------------------------|--|--------------|---|---------|-------------|--|
| No. <b>W 34481</b>  |                        | <b>Due no later than Nov 30, 2010</b><br><b>Annual Report Form</b>   |              | 2. Registered Agent and Address ( <b>NO PO BOX</b> )                                |         |             |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080  |                        | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>RETAIL BRAND GROUP, LLC<br>CAMILLE M METZ<br>PO BOX 352<br>BUFFALO NY 14240-0352<br>USA |              | CORPORATION SERVICE COMPANY<br>12550 W EXPLORER DR STE 100<br>BOISE ID 83713<br>USA |         |             |  |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>  |                        |  |              | 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 |  |
| MEMBER  | SODEXO OPERATIONS, LLC | ATTN: LAW DEPARTMENT 9801<br>WASHINGTONIAN BLVD  | GAITHERSBURG | MD  | USA     | 20878       |  |
| 5. Organized Under the Laws of:<br><br><b>DE</b><br><b>W 34481</b>                                  |                        | 6. Annual Report must be signed.*<br><br>Signature: Scott Brooks<br>Name (type or print): Scott Brooks<br><br>Date: 09/29/2010<br>Title: Asst Secretary  |              |   |         |             |  |
| Processed 09/29/2010      * Electronically provided signatures are accepted as original signatures. |                        |  |              |   |         |             |  |