| No. W 60458 | | Due n | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|------------|--|--|--|------------------|---------|-------------|
| Return to: | | Annual Report Form | | C T CORPORATION SYSTEM | | | |
| 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. DOMINO'S PIZZA DISTRIBUTION LLC SUE BROWN 24 FRANK LLOYD WRIGHT DRIVE PO BOX 485 ANN ARBOR MI 48106-0485 | | 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. New Registered Agent Signature:* | | | |
| | | | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code |
| MANAGER | MICHAEL T | LAWTON | 24 FRANK LLOYD WRIGHT DRIVE PO BOX 485 | ANN ARBOR | MI | USA | 48106 |
| MANAGER | J. PATRICK | DOYLE | 24 FRANK LLOYD WRIGHT DRIVE PO BOX 485 | ANN ARBOR | MI | USA | 48106 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| DE W 60458 | | Signature: Michael T. Lawton | | | Date: 02/03/2014 | | |
| | | Name (type or print): Michael T. Lawton | | | Title: Manager | | |
| Processed 02/03/20 | 14 | * Electronically provide | ded signatures are accepted as original sign | natures. | | | |