Sta	ate of Rhode Island and Pro Office of the Secreta		ns Fee: \$50.00
	Division Of Business	Services	
148 W. River Street			
Providence RI 02904-2615			
HOPE	(401) 222-30	40	
Limited Liability Comp	any		
Annual Report			
Filing Period: September 1 -	November 1		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR:	2017		
1. ID No. <u>001027262</u>			
2. Exact Name of the Limited Liability Company Yum Restaurant Services Group, LLC			
3. State of Formation			
State: <u>DE</u>			
ARTICLE III			
Using the following NAICS codes, please select the code that best describes your business.			
NAICS Code		6	<u>72</u>
	Character of the Business Which		d in Rhode Island
TO CONDUCT MANAGEMENT AND SUPPORT SERVICES			
5. Principal Office Addres	S		
No. and Street: 1441 (	GARDINER LANE		
		: <u>KY</u> Zip: <u>40213</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact T	itle:		
	GARDINER LANE		
City or Town: LOUIS	SVILLE State	: <u>KY</u> Zip: <u>40213</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addr	ess
	First, Middle, Last, Suffix	Address, City or Town, S	tate, Zip Code, Country
MANAGER	YUML BRANDI, INC.	1441 GAF LOUISVILLE, K	RDINER LANE Y 40213 USA

## 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02914</u>

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 15 Day of February, 2017 at 12:04:00 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By <u>DIANA T. BEAKES</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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