RI SOS Filing Number: 201755306250 Date: 12/22/2017 12:02:00 PM

State of Rhode Island and Providence Plantations Department of State - Business Services [Division	SEC. CO. 2017	
Application for Registration		RETA RPOR DEC	
FOREIGN Limited Liability Company		~ 2 2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
→ Filing Fee: \$150.00		> □ □	
Pursuant to the provisions of RIGL <u>7-16-49</u> , the undersigned fo applies for a Certificate of Registration to transact business in t purpose submits the following statement:	reign limited liability company hereb the state of Rhode Island, and for the	PM 12: 02	
The name of the limited liability company is:			
AUNTIE ANNE'S FRANCHISOR SPV LLC			
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes No			
The name, if different, under which it proposes to register and transact business in Rhode Island is:			
2. The LLC is organized under the laws of: Delaware 3. The date of its organization is: 02/02/2017			
V2/V2/2017			
And the period of its duration is: CHECK ONLY ONE BOX			
Perpetual (on-going)			
Date certain for dissolution			
4. The name and address of the resident agent/office in Rhode	e Island is:		
Agent Name Corporation Service Company			
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard, Suite 200			
City/Town Warwick	RHODE ISLAND	Code 02888	
 The Department of State is appointed the agent of the foreign time there is no resident agent or if the resident agent cannot diligence. 	be found or served following the exe	ercise of reasonable	
6. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

liability company is organized is:

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7. The mailing address for the limited liability company is:			
5620 Glenridge Drive N.E., Atlanta, GA 30342			
8. Management of the Limited Liability Co.	mpany:		
The limited liability company is managed:			
By its members (If you have checked	this box, go to Section 9. (DO NOT fill out the char	t below.)	
By one (1) or more managers (List managers below)			
MANAGER	ADDRESS		
This application is accompanied by a Costate or country under the laws of which it	ertificate of Good Standing/Letter of Status issued is formed that is dated within 60 days of the filing c	by the proper officer of the of this document.	
10. Date when this application for Certificate of Registration will be effective: CHECK ONLY ONE BOX			
✓ Date received (Upon filing)		<u> </u>	
Later effective date (Date must be no more than 30 days from the day of filing)			
Under penalty of perjury, I declare and affi accompanying attachments, and that all st	rm that I have examined this Application for Regist atements contained herein are true and correct.	ration, including any	
Type or Print Name of LLC		Date	
Sarah E. Powell, EVP, GC & Secretary		12/21/2017	
Signature of Authorized Person	SIGN DOCUMENT HERE		

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AUNTIE ANNE'S FRANCHISOR SPV LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SECOND DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AUNTIE ANNE'S FRANCHISOR SPV LLC" WAS FORMED ON THE SECOND DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203507193

Date: 11-02-17

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

December 22, 2017 12:02 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

