	State of Rhode Office of the Secreta		ee: \$50.00°
	Division Of Business 148 W. River S	treet	
HOPE	Providence RI 029 (401) 222-30		
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	2020		
1. ID No. <u>00016257</u>	<u>1</u>		
2. Exact Name of the Li	mited Liability Company DOMIN	<u>O'S PIZZA MASTER ISSUER LI</u>	<u>LC</u>
3. State of Formation			
State: DE			
	ARTICLE III		
5	Code that best describes the primary e information on <u>NAICS</u> can be found		ownload
<u>812990</u>			
4. Brief Description of th	e Character of the Business Whicl	n is Actually Conducted in Rhode I	sland
DOMESTIC FRANCH	ISOR		
5. Principal Office Addre	ess		
No. and Street: <u>24 FRAN</u> 485	K LLOYD WRIGHT DRIVE, P.C	<u>). BOX</u>	
City or Town: <u>ANN AR</u>	BOR	State: <u>MI</u> Zip: <u>48106</u> Coun	try: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	e or Title of Contact Person:	
Contact Name: Contact			
No. and Street: <u>30 FRA</u> City or Town: <u>ANN A</u>	NK LLOYD WRIGHT DRIVE RBOR	State: MI Zip: <u>48106</u> Country	/: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBE	Each Manager of the Limited Lial	pility Company, if Applicable.	
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, C	Country
MANAGER	RICHARD E. ALLISON JR	30 FRANK LLOYD WRIGHT DR ANN ARBOR, MI 48106 USA	IVE

MANAGER	KEVIN S. MORRIS	30 FRANK LLOYD WRIGHT DR. ANN ARBOR, MI 48106 USA
MANAGER	STUART A LEVY	30 FRANK LLOYD WRIGHT DR. ANN ARBOR, MI 48106 USA
Changes Require Filing	RHODE ISLAND - DO NOT ALTER g of Form 642 - R.I.G.L. 7-16-11 STEM 450 VETERANS MEMORIAL	PARKWAY, SUITE 7A EAST
 This report must be ex 	ecuted by an authorized person	pursuant to R.I.G.L. 7-16-66 (b).
Signad this 20 Day of O	Antohan 2020 at 8.20.20 ANA have	the authonized norsen This electronic
signature of the individu acknowledgement of the individual's act and dee true, as of the date of the By JESSICA PARRISH	al or individuals signing this ins signatory, under penalties of pe d or the act and deed of the comp e electronic filing, in compliance	the authorized person. This electronic trument constitutes the affirmation or rjury, that this instrument is that pany, and that the facts stated herein are with R.I. Gen. Laws § 7-16.
signature of the individu acknowledgement of the individual's act and dee true, as of the date of the	al or individuals signing this ins signatory, under penalties of pe d or the act and deed of the comp e electronic filing, in compliance	trument constitutes the affirmation or rjury, that this instrument is that pany, and that the facts stated herein ar
signature of the individu acknowledgement of the individual's act and dee true, as of the date of the By JESSICA PARRISH	al or individuals signing this ins signatory, under penalties of pe d or the act and deed of the comp e electronic filing, in compliance	trument constitutes the affirmation of rjury, that this instrument is that pany, and that the facts stated herein