2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0100001822

Entity Name: BEN & JERRY'S FRANCHISING, INC.

Current Principal Place of Business:

30 COMMUNITY DRIVE SOUTH BURLINGTON. VT 05403

Current Mailing Address:

700 SYLVAN AVE. ENGLEWOOD CLIFFS, NJ 07632

FEI Number: 03-0360061

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PRES	Title	VP
Name	JOSTEIN, SOLHEIM	Name	RAPP, STEVEN M
Address	700 SYLVAN AVE.	Address	700 SYLVAN AVE.
City-State-Zip:	ENGLEWOOD CLIFFS NJ 07632	City-State-Zip:	ENGLEWOOD CLIFFS NJ 07632
Title	VP	Title	ATT
Name	SCHWARTZ, DAVID	Name	SOLINGA, STEVE
Address	700 SYLVAN AVE.	Address	.700 SYLVAN AVE.
City-State-Zip:	ENGLEWOOD CLIFFS NJ 07632	City-State-Zip:	ENGLEWOOD CLIFFS NJ 07632
Title	CFO	Title	ASSISTANT SECRETARY
Title Name	CFO BLANKEN, IVAR	Title Name	ASSISTANT SECRETARY RADIN, ANTHONY B
Name	BLANKEN, IVAR	Name	RADIN, ANTHONY B 700 SYLVAN AVE.
Name Address	BLANKEN, IVAR 700 SYLVAN AVE.	Name Address	RADIN, ANTHONY B 700 SYLVAN AVE.
Name Address City-State-Zip:	BLANKEN, IVAR 700 SYLVAN AVE. ENGLEWOOD CLIFFS NJ 07632	Name Address City-State-Zip:	RADIN, ANTHONY B 700 SYLVAN AVE. ENGLEWOOD CLIFFS NJ 07632
Name Address City-State-Zip: Title	BLANKEN, IVAR 700 SYLVAN AVE. ENGLEWOOD CLIFFS NJ 07632 TREASURER	Name Address City-State-Zip: Title	RADIN, ANTHONY B 700 SYLVAN AVE. ENGLEWOOD CLIFFS NJ 07632 ASSISTANT TREASURER
Name Address City-State-Zip: Title Name	BLANKEN, IVAR 700 SYLVAN AVE. ENGLEWOOD CLIFFS NJ 07632 TREASURER GRANING, MICHAEL	Name Address City-State-Zip: Title Name	RADIN, ANTHONY B 700 SYLVAN AVE. ENGLEWOOD CLIFFS NJ 07632 ASSISTANT TREASURER IMPARATO, MICHAEL

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVE SOLINGA

04/13/2018 ASSISTANT TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

Date

FILED Apr 13, 2018 Secretary of State CC3303370061