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: KENDALL HELFENBEIN SECRETARY

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

Electronic Signature of Signing Officer/Director Detail

Entity Name: ROMA FRANCHISE CORPORATION **Current Principal Place of Business:**

1700 ALMA DRIVE SUITE 500 PLANO, TX 75075

Current Mailing Address:

DOCUMENT# F94000003193

1700 ALMA DRIVE SUITE 500 PLANO, TX 75075 US

FEI Number: 75-2402837

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DR STE A TALLAHASSEE, FL 32301 US

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:

Officer/Director Detail : CFO/SECRETARY Title Title PD HELFENBEIN, KENDALL MYRES. KENNETH L Name Name 1700 ALMA DRIVE, SUITE 500 1700 ALMA DRIVE, SUITE 500 Address Address City-State-Zip: PLANO TX 75075 City-State-Zip: PLANO TX 75075

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED Mar 12, 2015 Secretary of State CC2148412598

Certificate of Status Desired: No

03/12/2015

Date

Date