

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000000066

FILED
Feb 26, 2008
Secretary of State

Entity Name: SODEXHO OPERATIONS, LLC

Current Principal Place of Business:

9801 WASHINGTONIAN BLVD.
GAITHERSBURG, MD 20878

New Principal Place of Business:

Current Mailing Address:

PO BOX 352
BUFFALO, NY 14240

New Mailing Address:

FEI Number: 52-2208088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SODEXHO, INC.
Address: 9801 WASHINGTONIAN BLVD.
City-St-Zip: GAITHERSBURG, MD 20878

Title: P () Delete
Name: MACEDONIA, RICHARD
Address: 9801 WASHINGTONIAN BLVD
City-St-Zip: GAITHERSBURG, MD 20878

Title: ASV () Delete
Name: STERN, ROBERT A
Address: 9801 WASHINGTONIAN BLVD
City-St-Zip: GAITHERSBURG, MD 20878

Title: V () Delete
Name: BUSH, JOHN M
Address: 9801 WASHINGTONIAN BLVD
City-St-Zip: GAITHERSBURG, MD 20878

Title: V () Delete
Name: AMAT, THIERRY
Address: 9801 WASHINGTONIAN BLVD
City-St-Zip: GAITHERSBURG, MD 20878

Title: V () Delete
Name: BROCKLAND, RICHARD
Address: 9801 WASHINGTONIAN BLVD
City-St-Zip: GAITHERSBURG, MD 20878

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: CHAVEL, GEORGE
Address: 9801 WASHINGTONIAN BLVD
City-St-Zip: GAITHERSBURG, MD 20878

Title: ASVD (X) Change () Addition
Name: STERN, ROBERT A
Address: 9801 WASHINGTONIAN BLVD
City-St-Zip: GAITHERSBURG, MD 20878

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS (X) Change () Addition
Name: ALLEN, RICHARD H
Address: 10 EARHART DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RICHARD H. ALLEN

AS

02/26/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date