To:



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To:

Division of Corporations

Fax Number : (850)617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

kevin.parks@dominos.com

REGISTERED AGENT CHANGE DOMINO'S PIZZA INTERNATIONAL PAYROLL SERVICES, INC.

Certificate of Status	0
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To:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-		organized under the laws of the State of _ registered agent, or both, in the State of F	
1. The name of t	he corporation:DOMINO'S PIZ	ZA INTERNATIONAL PAYROLL SERV	ICES, INC.
2. The principal	office address: 30 FRANK LLOY	D WRIGHT DRIVE, ANN ARBOR, MI 4	8106
4. Date of incorp	poration/qualification: 10/10/1990	Document number: S04920	
	street address of the current regist tment of State: (If resigned, enter r	tered agent and registered office on file wiresigned)	
	CORPORATION SERVICE CO	MPANY	2023
	1201 HAYS STREET		, T.
	TALLAHASSEE, FL 32301		•
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered off	ice Time
	1200 South Pine Island Road		,
		P.O. Rev. NOT acceptable	•
	Plantation, Florida 33324		
The street address changed will	ss of its registered office and the be identical.	street address of the business office of its	s registered agent,
Such change wa authorized by th	s authorized by resolution duly ac e board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so
Osoph	w.luf	Joseph W. Clementz - VI	7 + Assistant General Coursel
I hereby accept to I further agree to of my duties, and document is being corneration has	the appointment as registered age o comply with the provisions of a I I am familiar with and accept the ag filed merely to reflect a change heep polified in writing of this ch	ent and agree to act in this capacity. Il statutes relative to the proper and com to obligation of my position as registered in the registered office address, I hereb tange.	
	System general man	04/18/2023	
	ature of Registered Agent	Date	
If signing on bel	nalf of an entity:		
Jennifer Mincer			
ıÿ	ped or Printed Name * * * FILIN	IG FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

By: