

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000001777

Entity Name: NOODLES & COMPANY, INC.**Current Principal Place of Business:**520 ZANG ST, STE D
BROOMFIELD, CO 80021**Current Mailing Address:**520 ZANG ST, STE D
BROOMFIELD, CO 80021**FEI Number:** 84-1303469**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEOC
Name HARTNETT, ROBERT
Address 520 ZANG ST, SUITE D
City-State-Zip: BROOMFIELD CO 80021

Title DIRECTOR
Name BOENNIGHAUSEN, DAVID
Address 520 ZANG ST, SUITE D
City-State-Zip: BROOMFIELD CO 80021

Title EVPS
Name HEIDMAN, MELISSA
Address 520 ZANG ST, STE D
City-State-Zip: BROOMFIELD CO 80021

Title D
Name LYNCH, THOMAS
Address 520 ZANG ST, STE D
City-State-Zip: BROOMFIELD CO 80021

Title D
Name DAHNKE, SCOTT
Address 520 ZANG ST, STE D
City-State-Zip: BROOMFIELD CO 80021

Title DIRECTOR
Name TAUB, ANDREW
Address 520 ZANG ST, STE D
City-State-Zip: BROOMFIELD CO 80021

Title DIRECTOR
Name MURPHY, PAUL
Address 520 ZANG ST, STE D
City-State-Zip: BROOMFIELD CO 80021

Title DIRECTOR
Name JONES, JEFFREY
Address 520 ZANG ST, STE D
City-State-Zip: BROOMFIELD CO 80021

Continues on page 2

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: MELISSA HEIDMAN**SECRETARY****04/29/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name EGAN, MARY
Address 520 ZANG ST, STE D
City-State-Zip: BROOMFIELD CO 80021

Title DIRECTOR
Name MADSEN, DREW
Address 520 ZANG ST, STE D
City-State-Zip: BROOMFIELD CO 80021