

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000006307

**Entity Name:** FPT OPERATING COMPANY, LLC

**Current Principal Place of Business:**

127112 PARK CENTRAL DR  
SUITE 350  
DALLAS, TX 75251

**Current Mailing Address:**

127112 PARK CENTRAL DR  
SUITE 350  
DALLAS, TX 75251 US

**FEI Number:** 81-4590281

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S 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

**Authorized Person(s) Detail :**

Title	MANAGER
Name	ODRICH, MICHAEL
Address	127112 PARK CENTRAL DR SUITE 350
City-State-Zip:	DALLAS TX 75251
Title	MEMBER
Name	AMCP PAYMENTS INTERMEDIATE COMPANY, LLC
Address	127112 PARK CENTRAL DR SUITE 350
City-State-Zip:	DALLAS TX 75251

Title	MANAGER
Name	DIERKS, CHRIS
Address	127112 PARK CENTRAL DR SUITE 350
City-State-Zip:	DALLAS TX 75251
Title	MANAGER
Name	HAISCH, ROB
Address	127112 PARK CENTRAL DR SUITE 350
City-State-Zip:	DALLAS TX 75251

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHAEL ODRICH

**MANAGER**

**04/04/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date