

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1900000792

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

**Current Principal Place of Business:**

300 BRICKSTONE SQUARE, SUITE 201  
ANDOVER, MA 01810

**Current Mailing Address:**

300 BRICKSTONE SQUARE, SUITE 201  
ANDOVER, MA 01810 US

**FEI Number:** 83-2958836

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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 P  
Name MANSFIELD, DAVID  
Address 300 BRICKSTONE SQUARE, SUITE 201  
City-State-Zip: ANDOVER MA 01810

Title VP  
Name NEEDHAM, CHRISTOPHER  
Address 300 BRICKSTONE SQUARE, SUITE 201  
City-State-Zip: ANDOVER MA 01810

Title SR DIRECTOR FINANCE AND BUSINESS OPERATIONS  
Name NICODEMUS, KALYN A  
Address 300 BRICKSTONE SQUARE, SUITE 201  
City-State-Zip: ANDOVER MA 01810

*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:** KALYN A NICODEMUS

**SR DIRECTOR FINANCE AND BUSINESS OPERATIONS**      04/17/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date