

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000002170

Entity Name: BETTERLESSON, INC.

Current Principal Place of Business:

410 UNIVERSITY AVE, DPT# 11046
WESTWOOD, MA 02090-2311

Current Mailing Address:

955 MASSACHUSETTS AVE STE 300
CAMBRIGE, MA 02139 US

FEI Number: 45-2018513

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH N STE 300
ST PETERSBURG, FL 33702 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 PRESIDENT
Name KENNARD, MATTHEW
Address 410 UNIVERSITY AVE, DPT# 11046
City-State-Zip: WESTWOOD MA 02090-2311

Title VP
Name FARMER, KORY
Address 410 UNIVERSITY AVE, DPT# 11046
City-State-Zip: WESTWOOD MA 02090-2311

Title SECRETARY
Name FARMER, KORY
Address 410 UNIVERSITY AVE, DPT# 11046
City-State-Zip: WESTWOOD MA 02090-2311

Title TREASURER
Name FARMER, KORY
Address 410 UNIVERSITY AVE, DPT# 11046
City-State-Zip: WESTWOOD MA 02090-2311

Title DIRECTOR
Name GRODD, ALEXANDER
Address 410 UNIVERSITY AVE, DPT# 11046
City-State-Zip: WESTWOOD MA 02090-2311

Title DIRECTOR
Name O'TOOLE, JAMI
Address 410 UNIVERSITY AVE, DPT# 11046
City-State-Zip: WESTWOOD MA 02090-2311

Title DIRECTOR
Name PATTERSON, VICTOR
Address 410 UNIVERSITY AVE, DPT# 11046
City-State-Zip: WESTWOOD MA 02090-2311

Title DIRECTOR
Name MOHTA, VINAY
Address 410 UNIVERSITY AVE, DPT# 11046
City-State-Zip: WESTWOOD MA 02090-2311

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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: MATTHEW KENNARD

PRESIDENT

02/20/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CERF, CHRISTOPHER
Address 410 UNIVERSITY AVE, DPT# 11046
City-State-Zip: WESTWOOD MA 02090-2311

Title DIRECTOR
Name OSBORN, ERIN
Address 410 UNIVERSITY AVE, DPT# 11046
City-State-Zip: WESTWOOD MA 02090-2311