## Florida Department of State (Division of Computations Hilbertraffic Filing Gover Sheet)

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062
Phone : (888)705-7274
Fax Number : (888)706-7274

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

Fmail	Address:			

## LLC REGISTERED AGENT CHANGE BUYERS EDGE PLATFORM OPCO, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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2023 DEC - 6 PH 3: 4

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K. Brumblery

## **COVER LETTER**

	Registration Section Division of Corporations		
SUBJE	Buyers Edge Platt	form Opco, LLC	
SCESE		Name of Limited Lia	bility Company
Dear Si	r or Madam:		
The enc	losed Registered Agent/Registered	Office Change and fo	ee(s) are submitted for filing.
Please r	eturn all correspondence concernin	g this matter to the fo	ollowing:
Lori Wh	alen		
	Name of Person		_
Register	ed Agent Solutions, Inc.		
	Firm/Company		_
Corpora	te Center One, 5301 Southwest Pkwy,	Ste 400	
	Address		_
Austin,	TX 78735		
	City/State and Zip Co	de	
E-	mail address: (to be used for future	annual report notific	ation)
For furt	her information concerning this ma	tter, please call:	
Lori Wh	alen	888 at (	705-7274
-	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the follow	ving amount:	
	S25 Filing Fee	□ \$55	Filing Fee & Certified Copy
15/11/01/0			

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

2. (a)	307 Waverley Oaks Road		b) 307 W	averley Oak	s Road	
<b>-</b> / ( <del>-</del> / )	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	'	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	401	_	401			
	Waltham, MA 02452	_	Waltha	m, MA 0245	2	
	6/6/2019		L190001	43478		
3.	Date of filing/registration in Florida	4.		Documen	t number	
5. (a)	TRAC - The Registered Agent Company					
). (u)	Registered Agent and Registered Office shown on the records of the	e Florid	la Dept, of St	ate:		
	Registered Office Address (MUST BE FLORIDA STREET A.  236 E. 6th Avenue	<u>DDRES</u>	<u>:2)</u>			
	Tallahassee . FL	32303				21
(b)	Registered Agent Solutions, Inc.  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Common New Regis</u>	Office a	ddress:	_	:	DEC -6 PM
	NEW Registered Office Address:			<del></del>	•	_ بب
	Ste. A			<del></del>		<del></del>
	Tallahassee, FL	32308				
change agent v was/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liab	egister oility c the lia imited	ed office a ompany, it nited liabil liability co	ind the busir is hereby co ity company ompany.	ness office of toonfirmed that y or as otherw	the registered the change(s) ise provided in
/s/	Jaclyn Wright	Ja-	clyn Wright			ed Person
U	ture of a member or authorized representative of a member				typed name of sig	•
provisi he obl to merc	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I he I in writing of this change.	e to ac erforn for in ereby c	t in this ca nance of mi Chapter 60 confirm tha	pacity. I fur y duties, and )5, F.S. Or, t the limited	rther agree to I I am Jamilian if this docum I liability comp	comply with the with and accept ent is being filed pany has been
winer	Manage di Mis Change.	ırv				

Signature of Registered Agent