

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001785

Entity Name: FIDELITY WORKPLACE INVESTING LLC**Current Principal Place of Business:**245 SUMMER STREET, ZW9A
BOSTON, MA 02210**Current Mailing Address:**200 SEAPORT BLVD.
C/O CORPORATE LEGAL - MZ ZW9A
BOSTON, MA 02210 US**FEI Number:** 04-3523437**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T 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	DIRECTOR
Name	MACDONALD, JAMES M.
Address	245 SUMMER STREET
City-State-Zip:	BOSTON MA 02210

Title	T
Name	DOHERTY, MICHAEL
Address	245 SUMMER STREET
City-State-Zip:	BOSTON MA 02210

Title	ASST. SECRETARY
Name	STAHL, PETER D.
Address	245 SUMMER STREET
City-State-Zip:	BOSTON MA 02210

Title	ASST. TREASURER
Name	GREEN, ERIC C.
Address	245 SUMMER STREET
City-State-Zip:	BOSTON MA 02210

Title	DIRECTOR, PRESIDENT
Name	BARRY, KEVIN M.
Address	245 SUMMER STREET
City-State-Zip:	BOSTON MA 02210

Title	ASST. SECRETARY
Name	MCLAIN, BRIAN C.
Address	245 SUMMER STREET
City-State-Zip:	BOSTON MA 02210

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: PETER D. STAHL**SECRETARY****05/01/2019**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date