

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000007035

Entity Name: OFFICE DEPOT, LLC**Current Principal Place of Business:**6600 NORTH MILITARY TRAIL
BOCA RATON, FL 33496**Current Mailing Address:**6600 NORTH MILITARY TRAIL
BOCA RATON, FL 33496 US**FEI Number:** 59-2663954**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, EXECUTIVE VICE
PRESIDENT, CHIEF FINANCIAL
OFFICER AND TREASURER**Name** SCAGLIONE, DIEGO ANTHONY**Address** 6600 NORTH MILITARY TRAIL**City-State-Zip:** BOCA RATON FL 33496**Title** CEO**Name** SMITH, GERRY P.**Address** 6600 NORTH MILITARY TRAIL**City-State-Zip:** BOCA RATON FL 33496**Title** EXECUTIVE VICE PRESIDENT,
BUSINESS SOLUTIONS DIVISION**Name** CENTRELLA, DAVID C.**Address** 6600 NORTH MILITARY TRAIL**City-State-Zip:** BOCA RATON FL 33496**Title** EXECUTIVE VICE PRESIDENT, CHIEF
INFORMATION OFFICER**Name** LEEPER, TERRY**Address** 6600 NORTH MILITARY TRAIL**City-State-Zip:** BOCA RATON FL 33496**Title** MANAGER, EXECUTIVE VICE
PRESIDENT, CHIEF LEGAL OFFICER
AND CORPORATE SECRETARY**Name** HLAVINKA, SARAH E.**Address** 6600 NORTH MILITARY TRAIL**City-State-Zip:** BOCA RATON FL 33496**Title** PRESIDENT**Name** MOFFITT, KEVIN**Address** 6600 NORTH MILITARY TRAIL**City-State-Zip:** BOCA RATON FL 33496**Title** EXECUTIVE VICE PRESIDENT, CHIEF
MERCHANDISING & SUPPLY CHAIN
OFFICER**Name** GANNFORS, JOHN W.**Address** 6600 NORTH MILITARY TRAIL**City-State-Zip:** BOCA RATON FL 33496**Title** EXECUTIVE VICE PRESIDENT, CHIEF
HUMAN RESOURCES OFFICER**Name** MALONEY, ZOE**Address** 6600 NORTH MILITARY TRAIL**City-State-Zip:** BOCA RATON FL 33496**Continues on page 2**

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: TRINLEY , ALICIA**ASSISTANT SECRETARY** 01/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP, TAX
Name AVANT, ROBERT G.
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title ASSISTANT SECRETARY
Name TRINLEY, ALICIA
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title VP, ASSISTANT TREASURER
Name HOOD, MAX
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496