	State of Rhode Island	
	State of Rhode Island Department of State - Business Service	es Division

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Application for RegistrationFOREIGN Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16-49</u>, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that

purpose submits the following statement:					
The name of the limited liability company is:					
FPP Enterprise LLC					
is this company organized in its state or country of formation as a low-profit limited liability company? Yes No X					
The name, if different, under which it proposes to register and transact business in Rhode Island is:					
2. The LLC is organized under the laws of: Delaware					
3. The date of its organization is: 04/07/2016					
And the period of its duration is: CHECK ONE BOX ONLY					
X Perpetual (on-going)					
Date certain for dissolution					
4. The name and address of the resident agent/office in Rhode Island is:					
Agent Name C T Corporation System					
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway Suite 7A					
City/Town East Providence	State RHODE ISLAND	Zip Code 02914			
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:					
Payment Services- MTL					
Check the box to indicate an attachment					

FILED 150

JAN 29 2025

BY 43A5G

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

The RI Department of State is appointed any time, there is no resident agent or if the diligence.	the agent of the foreign limited liability company for service of process if, at e resident agent cannot be found or served following the exercise of reasonable				
7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is:					
1210 AvidXchange Lane, Charlotte, NC 28206					
8. The mailing address for the limited liability company is:					
1210 AvidXchange Lane, Charlotte, NC 28206					
9. Management of the Limited Liability Company:					
The Limited Liability Company is to be managed by: CHECK ONLY ONE BOX					
By its members (If you have checked this box, DO NOT fill out the chart below)					
X By one (1) or more managers (List managers below)					
MANAGER	ADDRESS				
Daniel Drees, Manager	1210 AvidXchange Lane, Charlotte, NC 28206				
10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing.					
	ite of Registration will be effective: CHECK ONE BOX ONLY				
X Date received (Upon filing)					
Later effective date (Date must be no more than 90 days from the date of filing)					
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.					
Type or Print Name of LLC Date					
FPP Enterprise LLC 12 30 2004					
Signature of Authorized Person					
1 1 1 1 1					



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FPP ENTERPRISE LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE SECOND DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 202604626

Date: 01-02-25