

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000001668

Entity Name: AVIDXCHANGE, INC.

Current Principal Place of Business:

1111 METROPOLITAN DRIVE, SUITE 650
CHARLOTTE, NC 28204

Current Mailing Address:

1111 METROPOLITAN DRIVE, SUITE 650
CHARLOTTE, NC 28204 US

FEI Number: 56-2193588

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 CHAIRMAN, PRESIDENT
Name PRAEGER, MIKE
Address 1111 METROPOLITAN DRIVE, SUITE 650
City-State-Zip: CHARLOTTE NC 28204

Title D
Name FELD, BRAD
Address 1111 METROPOLITAN DRIVE, SUITE 650
City-State-Zip: CHARLOTTE NC 28204

Title D
Name HARRIS, MATT
Address 1111 METROPOLITAN DRIVE, SUITE 650
City-State-Zip: CHARLOTTE NC 28204

Title D
Name HAUSMAN, JIM
Address 1111 METROPOLITAN DRIVE, SUITE 650
City-State-Zip: CHARLOTTE NC 28204

Title D
Name MCLAUGHLIN, STEVE
Address 1111 METROPOLITAN DRIVE, SUITE 650
City-State-Zip: CHARLOTTE NC 28204

Title D
Name MORRIS, HANS
Address 1111 METROPOLITAN DRIVE, SUITE 650
City-State-Zip: CHARLOTTE NC 28204

Title D
Name MORRIS, NIGEL
Address 1111 METROPOLITAN DRIVE, SUITE 650
City-State-Zip: CHARLOTTE NC 28204

Title TREASURER
Name BERTAU, KAREN
Address 1111 METROPOLITAN DRIVE, SUITE 650
City-State-Zip: CHARLOTTE NC 28204

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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: ROSS AGRE

SECRETARY

04/03/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name AGRE, ROSS
Address 1111 METROPOLITAN DRIVE, SUITE 650
City-State-Zip: CHARLOTTE NC 28204

Title DIRECTOR
Name MILLER, DAVID
Address 1111 METROPOLITAN DRIVE, SUITE
650
City-State-Zip: CHARLOTTE NC 28204