(Street)

FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## OMB APPROVAL 3235-0104 OMB Number: Estimated average burden hours per response:

0.5

# INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

F				<ul><li>(a) of the Securities Exchar</li><li>e Investment Company Act</li></ul>		f 1934			
1. Name and Address of Reporting Person* Scooby Aggregator, LP	2. Date of Event Requiring Statement (Month/Day/Year) 01/13/2021		3. Issuer Name <b>and</b> Ticker or Trading Symbol						
(Last) (First) (Middle) C/O CVC CAPITAL PARTNERS ONE MARITIME PLAZA, 16TH FL,			- 1	Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)		
300 CLAY ST  (Street)				Officer (give title below)	Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person		
SAN FRANCISCO CA 94111	,						7	Form filed Reporting	by More than One Person
(City) (State) (Zip)									
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)				Amount of Securities eneficially Owned (Instr. ) 3. Ownersh Form: Direct (D) or Indirect (I) (Instr. 5)		Direct Indirect	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Private Company Class A Common Stock				1,603,951,046		I	By Scooby Aggregator, LP <sup>(1)</sup>		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)		d	3. Title and Amount of Securitie Underlying Derivative Security (Instr. 4)		4. Conve	rcise		6. Nature of Indirect Beneficial Ownership (Instr. 5)	
					Amount or Securi		tive	or Indirect (I) (Instr. 5)	o,
	Date Exercisable	Expiration Date	on	Title	of Shares				
1. Name and Address of Reporting Person*  Scooby Aggregator, LP		_							
(Last) (First) (Mid	dle)								
C/O CVC CAPITAL PARTNERS ONE MARITIME PLAZA, 16TH FL, 300 CLAY									
ST	500 CLAT	_							
(Street) SAN									
FRANCISCO CA 941	11	_							
(City) (State) (Zip)									
1. Name and Address of Reporting Person* Scooby LP									
(Last) (First) (Mid	dle)								
ONE MARITIME PLAZA, 16TH FL, ST	300 CLAY								

SAN FRANCISCO	CA	94111					
(City)	(State)	(Zip)					
Name and Address of Reporting Person*     Scooby GP LLC							
(Last) C/O CVC CAPI	(First)	(Middle)					
ONE MARITIME PLAZA, 16TH FL, 300 CLAY ST							
(Street) SAN FRANCISCO	CA	94111					
(City)	(State)	(Zip)					
Name and Address of Reporting Person*     Scooby Aggregator GP, LLC							
(Last)	(First)	(Middle)					
C/O CVC CAPITAL PARTNERS							
ONE MARITIME PLAZA, 16TH FL, 300 CLAY ST							
(Street) SAN FRANCISCO	CA	94111					
(City)	(State)	(Zip)					

### **Explanation of Responses:**

1. These securities are held of record by Scooby Aggregator, LP. The general partner of Scooby Aggregator LP is Scooby Aggregator GP, LLC, a member-managed limited liability company whose sole member is Scooby LP. The general partner of Scooby LP is Scooby GP LLC, a member-managed limited liability company whose sole members are CVC Pet LP and CPP Investments. Each of Scooby Aggregator LP, Scooby LP, Scooby GP LLC, CVC Pet LP and CPP Investments disclaims beneficial ownership of the securities reported herein for purposes of Rule 16a-1(a) under the Securities and Exchange Act of 1934, as amended, except to the extent of their pecuniary interest therein, if any.

### Remarks:

Scooby LP; By Scooby GP, LLC, its general partner; By /s/ Cameron 01/13/2021 Breitner, Authorized <u>Signatory</u> Scooby GP, LLC; By /s/ Cameron Breitner, 01/13/2021 **Authorized Signatory** Scooby Aggregator, LP; By Scooby Aggregator GP, 01/13/2021 LLC, its general partner; By /s/ Cameron Breitner, Authorized Signatory Scooby Aggregator GP, LLC; By Scooby LP, its 01/13/2021 sole member; By /s/ Cameron Breitner, **Authorized Signatory** \*\* Signature of Reporting Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).