To:

Qualification/Tax Lien Section

Division of Corporations CORPORATION RELIEDY (Name of corporation - must include suffix) Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida. Please return all correspondence concerning this matter to the following: (Name of Person) Should you need to call someone concerning this matter, please call: ADA TSW (Area Code & Daytime Telephone Numbe (Name of Person) MAILING ADDRESS: STREET ADDRESS: Qualification/Tax Lien Section Qualification/Tax Lien Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32399 Enclosed is a check for the following amount: **ॼ** \$70.00 Filing Fee □ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status &

Certified Copy

Certified Copy

Certificate of Status

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State.

August 24, 1999

ADA TSUI 5890 STONERIDGE DRIVE PLEASANTON, CA 97588

SUBJECT: REMEDY CORPORATION

Ref. Number: W99000019562

We have received your document for REMEDY CORPORATION and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline **Document Specialist**

Letter Number: 999A00042420

or partnership if not so contained in the name at present.

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name of present

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| | 72.0265675 | | |
|--|--|--|--|
| 2. (State or country under the law of which it is incorporated) | FEI number, if applicable) | | |
| (State or country under the law of the law o | stukt | | |
| 4. (State or country under the law of which it is incorporately 4. (Date of Incorporation) 5. (Duration: Ye | ar corp. will cease to exist | or "perpetual 1 | |
| | | ASS 9 | |
| 6. (Date first transacted business in Florida. (See sections 607.150) | 7, 607.1502, and 817.15 | OCT AHZ | |
| 7 5890 STANER TOGE DR. | | ASA AS | |
| /· | | SEE. SY C | |
| PLEASANTIN : CA 94588 (Current mailing add | | T S | |
| | | ORIE ORIE | |
| 8. GARAGE GARALTING | | Dri J | |
| 8. GOFTWARE GLES CONSULTING (Purpose(s) of corporation authorized in nome state or count | ry to be carried out in the | state of Florida) | |
| a military and adopting | (P.O. Box or Mail Drop | Box NOT | |
| 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT. | | | |
| 2. Inditio min and an and an | | | |
| acceptable) Name: Corporation Service Company | y | | |
| acceptable) Name: Corporation Service Company | У | | |
| Office Address: 1201 Hays Street | y | | |
| Office Address: 1201 Hays Street | , Florida, | | |
| Office Address: 1201 Hays Street | y | | |
| Name:Corporation Service Company Office Address: | , Florida, _ | 32301 (Zip Code) | |
| Name: Corporation Service Company Office Address: 1201 Hays Street Tallahassee 10. Registered agent's acceptance: | , Florida, _ | 32301 . (Zip Code) | |
| Name: Corporation Service Company Office Address: 1201 Hays Street Tallahassee 10. Registered agent's acceptance: Having been named as registered agent and to acceptance in this application. | , Florida, t service of process f on, I hereby accept | 32301 (Zip Code) or the above stated the appointment as | |
| Name: Corporation Service Company Office Address: 1201 Hays Street Tallahassee 10. Registered agent's acceptance: Having been named as registered agent and to accept corporation at the place designated in this application registered agent and agree to act in this capacity. I further registered agent and agree to act in the particular performance. | t service of process fon, I hereby accept ther agree to comply whance of my duties, ar | 32301 (Zip Code) or the above stated the appointment as | |
| Name: Corporation Service Company Office Address: 1201 Hays Street Tallahassee 10. Registered agent's acceptance: Having been named as registered agent and to accept corporation at the place designated in this application registered agent and agree to act in this capacity. I further registered agent and agree to act in the particular performance. | t service of process fon, I hereby accept ther agree to comply whance of my duties, ar | 32301 (Zip Code) or the above stated the appointment as | |
| Office Address: | t service of process fon, I hereby accept ther agree to comply whance of my duties, ar | 32301 (Zip Code) or the above stated the appointment as | |
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11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY-P.O. Box NOT acceptable) A. DIRECTORS (Street address only- P.O. Box NOT acceptable) ATTACHED Address: Vice Chairman: ____ Address: Director: Address: Director: Address: B. OFFICERS (Street address only- P.O. Box NOT acceptable) SEE ATTACHED SHEDWE President: Address: Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application.) RN J- FLAR

(Typed or printed name and capacity of person signing application)

REMEDY CORPORATIONS' OFFICERS LISTING

Officers

| Address | 1505 Salado Dr., Mountain View, CA 94043 | Address |
|----------|---|--|
| Title | Lawrence L. Garlick Chairman of the Board, CEO Richard P. Alloco VP & General Mgr. Of Worldwide Customer Serv. Todd Basche Eric S. Bergan Vice President, Independent Software Vendors Michael L. Dionne Carajane Finn Vice President, Employee Services Vice President, Employee Services Ron J. Fior Vice President, Finance, Operations & CFO Ken Boyd Vice President, Chief Information Officers David Mahler Vice President, Marketing | Directors Title Lawrence L. Garlick Chairman of the Board David Mahler Director Harvey C. Jones Jr. Director John F. Shoch Director James R. Swartz Director |
| Officers | Lawrence L. Garlick Richard P. Alloco Todd Basche Eric S. Bergan Michael L. Dionne Carajane Finn Ron J. Fior Ken Boyd David Mahler Matthew R. Miller | Directors Lawrence L. Garlick David Mahler Harvey C. Jones Jr. John F. Shoch James R. Swartz |

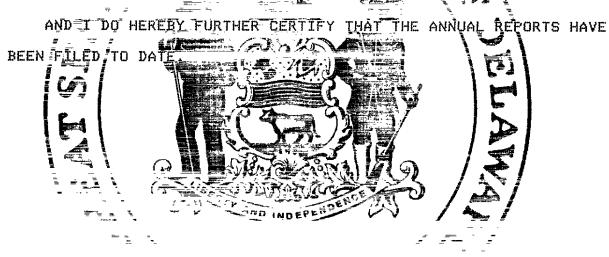
FILED 99 OCT 25 PM 1: 27

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "REMEDY CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF AUGUST.

AND I DOLHEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Edward J. Freel, Secretary of State

DATE:

AUTHENTICATION:

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991338733

8300

2247072

08-13-99