Florida Department of State
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To:
Division of Corporations
Fax Number: (850) 205-0380

From:
Account Name: C T CORPORATION SYSTEM
Account Number: FCAC0000023
Phone: (850) 222-1092
Fax Number: (850) 878-5926

REGISTERED AGENT CHANGE
WIKIMEDIA FOUNDATION, INC.

<table>
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<tr>
<th>Certificate of Status</th>
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<td>Certified Copy</td>
<td>0</td>
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<tr>
<td>Page Count</td>
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<td>Estimated Charge</td>
<td>$35.00</td>
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS

Pursuant to the provisions of sections 607.092, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Wikimedia Foundation, Inc.

2. The principal office address: 200 2nd Avenue South, #358
   St. Petersburg, FL 33701

3. The mailing address (if different): 200 2nd Avenue South, #358
   St. Petersburg, FL 33701

4. Date of Incorporation/Qualification: June 20, 2003    Document number: N0300005323

5. The name and street address of the current registered agent and registered office on file with the
   Florida Department of State:

   Jimmy D Wales
   3911 Harrisburg St. NE
   St. Petersburg, FL 33703

6. The name and street address of the new registered agent (if changed) and/or registered office
   (if changed):

   CT Corporation System
   1200 S. Pine Island Road
   Plantation, FL 33324

   The street address of its registered office and the street address of the business office of its registered agent,
   as changed will be identical.

   Such change was authorized by resolution duly adopted by its board of directors or by an officer so
   authorized by the board, or the corporation has been notified in writing of the change.

   /s/ Michael Davis, Treasurer
   (Signature of officer or directors)

   I hereby accept the appointment as registered agent and agree to act in this capacity.
   I certify that I am the person to whom all notices and communications relative to the proper and complete
   performance of my duties, and I have access to and accept the obligation of my position as registered agent. I
   hereby affirm that this document is being filed merely to reflect a change in the registered office address. I
   hereby confirm that the corporation has been notified in writing of this change.

   /s/ Barbara A. Burke
   (Signature)

   ** FILING FEE: $35.00 **

   MAKE CHECK PAYABLE TO: FLORIDA DEPARTMENT OF STATE
   MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6527, TALLAHASSEE, FL 32314
   CR25015 ($35)