

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000008898

**Entity Name:** NCC GROUP SOFTWARE RESILIENCE (AMERICAS), LLC

**Current Principal Place of Business:**

650 CALIFORNIA ST STE 2950  
SAN FRANCISCO, CA 94108

**Current Mailing Address:**

650 CALIFORNIA ST STE 2950  
SAN FRANCISCO, CA 94108

**FEI Number:** 86-3409294

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEGALINC CORPORATE SERVICES INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER, PRESIDENT,  
CHIEF COMMERCIAL OFFICER  
Name HIEKEN, CAROLYN  
Address 650 CALIFORNIA ST STE 2950  
City-State-Zip: SAN FRANCISCO CA 94108

Title CEO  
Name MADDISON, MICHAEL  
Address 650 CALIFORNIA ST STE 2950  
City-State-Zip: SAN FRANCISCO CA 94108

Title CFO, TREASURER  
Name ELLIS, GUY  
Address 650 CALIFORNIA ST STE 2950  
City-State-Zip: SAN FRANCISCO CA 94108

Title GLOBAL FINANCIAL CONTROLLER  
Name BEAVER, ANDREW  
Address 650 CALIFORNIA ST STE 2950  
City-State-Zip: SAN FRANCISCO CA 94108

Title SECRETARY  
Name WILLIAMS, JONATHAN  
Address 650 CALIFORNIA ST STE 2950  
City-State-Zip: SAN FRANCISCO CA 94108

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JONATHAN WILLIAMS

**SECRETARY**

**05/01/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date