

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000002243

Entity Name: SERVICENOW, INC.**Current Principal Place of Business:**2225 LAWSON LANE
SANTA CLARA, CA 95054**Current Mailing Address:**2225 LAWSON LANE
SANTA CLARA, CA 95054 US**FEI Number:** 20-2056195**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN STREET, SUITE 4
TALLAHASSEE, FL 32301 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 PRESIDENT AND CHIEF EXECUTIVE
OFFICER, DIRECTOR
Name DONAHOE, JOHN
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR
Name LUDDY, FREDERICK
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR
Name BOSTROM, SUSAN
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR
Name CHAMBERLAIN, PAUL
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR
Name SLOOTMAN, FRANK
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title CFO
Name SCARPELLI, MICHAEL
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR
Name CHADWICK, JONATHAN
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR
Name CODD, RONALD
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

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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: DERK LUPINEK

VP, LEGAL

04/25/2018

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MILLER, JEFFREY
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title SECRETARY
Name SPECKER, ROBERT
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title CHIEF PRODUCT OFFICER
Name DESAI, CHIRANTAN
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR
Name SANDS, ANITA
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054

Title VP, LEGAL
Name LUPINEK, DERK
Address 2225 LAWSON LANE
City-State-Zip: SANTA CLARA CA 95054