

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000004166

Entity Name: TWILIO INC.**Current Principal Place of Business:**375 BEALE STREET, SUITE 300
SAN FRANCISCO, CA 94105**Current Mailing Address:**375 BEALE STREET, SUITE 300
SAN FRANCISCO, CA 94105 US**FEI Number:** 26-2574840**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
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 D
Name DALZELL, RICHARD
Address 375 BEALE STREET, SUITE 300
City-State-Zip: SAN FRANCISCO CA 94105

Title D
Name DEETER, BYRON
Address 375 BEALE STREET, SUITE 300
City-State-Zip: SAN FRANCISCO CA 94105

Title D
Name DUBINSKY, DONNA
Address 375 BEALE STREET, SUITE 300
City-State-Zip: SAN FRANCISCO CA 94105

Title D
Name DONIO, ELENA
Address 375 BEALE STREET, SUITE 300
City-State-Zip: SAN FRANCISCO CA 94105

Title PRESIDENT, DIRECTOR
Name LAWSON, JEFF
Address 375 BEALE STREET, SUITE 300
City-State-Zip: SAN FRANCISCO CA 94105

Title D
Name IMMELT, JEFF
Address 375 BEALE STREET, SUITE 300
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR
Name ROTTENBERG, ERIKA
Address 375 BEALE STREET, SUITE 300
City-State-Zip: SAN FRANCISCO CA 94105

Title SECRETARY
Name SMITH, KARYN
Address 375 BEALE STREET, SUITE 300
City-State-Zip: SAN FRANCISCO CA 94105

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: KARYN SMITH**SECRETARY****07/28/2021**

Electronic Signature of Signing Officer/Director Detail

Date