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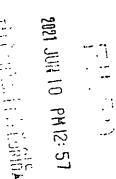
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Submoss Zinn, Hame)				
(Document Number)				
Certified Copies Certificates of Status				
<u> </u>				
Special Instructions to Filing Officer:				

Office Use Only



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92/10/21--9101--IB **29.00





CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: June 8, 2021

Order#: 833378-262

Re: NETIQ CORPORATION

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35....

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX ___ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0. nge is submitted for a corporation org r to change its registered office or regi	anized under the laws of the State of	Delaware
1. The name of t	he corporation: NETIQ CORPORATI	ON	
2. The principal	office address: 515 Post Oak Bouleva	ard, Suite 1200, Houston, TX 77027	
_	ddress (if different):		
4. Date of incorp	poration/qualification: 03/21/2001	Document number: F01000	001541
	street address of the current registered tment of State: (If resigned, enter resigned)	-	rith the
	C T Corporation System		_
	1200 South Pine Island Road		_
	Plantation, FL 33324		2
6. The name and (if changed):	I street address of the new registered ag	gent (if changed) and /or registered of	2021 JUN 10 PH 12: 5
	Corporation Service Company		- :: <u>-</u>
	1201 Hays Street		412
	Tallahassee	Box NOT acceptable FL 32301	12: 57 Lorrio A
The street addre	ess of its registered office and the stre be identical.	et address of the business office of i	ts registered agent,
Such change wa author(ze) by th	as authorized by resolution duly adopte board, or the corporation has been	ted by its board of directors or by ar notified in writing of the change.	officer so
Xiel	. E GOMI	Jill Cilmi, Vice President	
Signatur	re of an officer or director	Printed or typed name and	ntle
I further agree i of my duties, an document is bei corporation has	the appointment as registered agent of comply with the provisions of all st d I am familiar with and accept the of filed merely to reflect a change in Seen notified in writing of this change in Service Company	atutes relative to the proper and co bligation of my position as registere the registered office address, I here	ed agent. Or. it this
By:	in lei	06/01/2021	
	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	Asst. Vice President yped or Printed Name		
	* * * FILING	FEE: \$35.00 * * *	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)