FIIODOUNIS

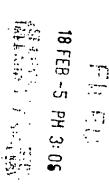
•					
(Requestor's Name)					
•					
ORIGIN ID:ILGA (302) 636-5400					
AMI CASPER CSC - WILMINGTON 251 LITTLE FALLS DRIVE					
251 LITTLE FALLS DRIVE					
WILMINGTON, DE 19808 UNITED STATES US					
UNITED STATES US					
(City/State/Zip/Phone #)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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R. WHITE
FEB 07 2018

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

statement of cha	provisions of sections 607.0502, 61 nge is submitted for a corporation r to change its registered office or	organized under the la	ws of the State of	Delaware	
1. The name of t	he corporation: SAGE INTACCT.	INC.			
2. The principal	office address: 300 Park Avenue,	Suite 1400, San Jose,	, CA 95110		
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 11/02/2011	Document	number: F11000	0004405	
	street address of the current regist tment of State: (If resigned, enter r		ed office on file v	vith the	
	Incorporating Services, Ltd.			3 3	
	1540 Glenway Drive			FEB ST	
	Tallahassee	FL	32301	की जिल्ला	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
	Corporation Service Company			操行。 60 -	
	1201 Hays Street P.O. Box NOT acceptable				
	Tallahassee	FL_	32301	_	
The street addre	ss of its registered office and the beidentical.	street address of the bu	isiness office of i	ts registered agent.	
Such change wa authorized by th	s authorized by resolution duly ac e board, or the corporation has be	lopted by its board of one on notified in writing of	directors or by an of the change.	officer so	
Signatur	Continue of an officer of director	Jill Cilmi, Vice I	President	ile	
I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered age o comply with the provisions of a my duties, and I am familiar with s document is being filed merely that the corporation has been not a Service Company	ll statutes relative to th and accept the obligat o reflect a change in t	ne proper and con tion of my position he registered offi	n as registered	
By: Cei M Lei 02/01/2018					
	nature of Registered Agent		Date		
If signing on bel	half of an entity:				
Ami M. Casper,	Asst. Vice President				
Ty	ped or Printed Name				

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *