Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000349043 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

**Enter	the	email	addness	for	this	busin	ess	entity	to	be i	used	for	futur	·e
ar	nnual	report	mailin	es.	Enter	only	one	email	adda	ress	plea	se.	• •	1.

COR AMND/RESTATE/CORRECT OR O/D RESIGN SHOTSPOTTER, INC.

Certificate of Status	U
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Hélp

From: David Thomas

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607-1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F14	000002779	
	(Document number of corporation (if known)	
SHOTSPOTTER, INC.		
(Name of	corporation as it appears on the records of the Depart	tment of State)
Delaware	3 06/26/2014	
(Incorporated under	r laws or) (Date author	rized to do business in Florida)
(4-	SECTION II 7 COMPLETE ONLY THE APPLICABLE CHA	NGES)
4 If the amendment changes the name of t	the corporation, when was the change effected under	the laws of its jurisdiction of
SoundThinking, Inc.		202
(Name of corporation after the amendm not contained in new name of the corpo	nent, adding suffix "corporation," "company," or "incoration)	orporated," or appropriate all eviations
(If new name is unavailable in Florida, o	enter alternate corporate name adopted for the purpos	e of transacting business in Florida) 🚣
	od of duration, indicate new period of duration	AH 9: 40 SSF: 1 FL
	(New duration)	
7 If the amendment changes the juris	sdiction of incorporation, indicate new jurisdiction	
	(New jurisdiction)	
8 If amending the registered agent and	Vor registered office address in Florida, enter the r	name of the
new registered agent and/or the new		
Name of New Registered Agent		
-	(Florida street address)	
New Registered Office Address	76	, Florida
	(City)	(zīp Code)
New Registered Agent's Signature, i	f changing Registered Agent:	Santana Eduario Sata
i nereby accept the appointment as regi	istered agent. I am familiar with and accept the obli	gations of the position.
Signature of New Reg	gistered Agent, if changing	

To:

itle Capacity	<u>Name</u>	<u>Address</u>	Type of Action
			Add
		 	L Remove
			Add
			L.Remove
		 	
			2023 OC
			2023 OCT -4 AH LEMOVE ALL ALLESSE AUGUSTES
			AH 9: 40
			Add
			f Remove
Attached is a certiful the application to under the laws of v	ficate or document of similar import othe Department of State, by the Sec which it is incorporated	t, evidencing the amendment, authenti- retary of State or other official having of	cated not more than 90 days prior to deli- custody of corporate records in the jurisdic

FILING FEE \$35.00

(Title of person signing)

(Typed or printed name of person signing)

To:



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'SHOTSPOTTER, INC.', FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO 'SOUNDTHINKING, INC.' ON THE SIXTH DAY OF APRIL, A.D. 2023, AT 8:02 O'CLOCK A.M.



Authentication: 204296284

Date: 10-03-23