F1500004002

(Requestor's Name) (Address)	
(Address)	
(Address)	
(Address)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	_
(Business Entity Name)	
(Dusiness Chirty Name)	
(Document Number)	
·-: Copies Certificates of Status	_
· _	
· al Instructions to Filing Officer:	

Office Use Only



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A E C . JAM 2 5 2023

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195				
REFERENCE : 387983 8379573				
AUTHORIZATION IN THE REAL PROPERTY OF THE PROP				
COST LIMIT : \$ 35.00				
ORDER DATE : January 20, 2023				
ORDER TIME : 10:35 AM				
ORDER NO. : 387983-011				
CUSTOMER NO: 8379573				
CHANGE OF AGENT				
NAME: ALIGN TECHNOLOGY, INC.				
FORCED DBA: (DELAWARE) ALIGN TECHNOLOGY, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Eyliena Baker				

EXAMINER'S INITIALS:

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

statement of cha	nge is submitted for a corporation	817.0502, 607.1508, or 617.1508, Florida St n organized under the laws of the State of _ r registered agent, or both, in the State of Fl	DE
1. The name of	the corporation: (DELAWARE) A	LIGN TECHNOLOGY, INC.	
	office address: Align Technology		
	tsdale Suite 1300 Tempe, AZ 95		
3. The mailing a	nddress (if different):		
4. Date of incor	poration/qualification: 08/03/201	5 Document number: F150000	04002
	d street address of the current regis rtment of State: (If resigned, enter	stered agent and registered office on file with resigned)	h the
	C T CORPORATION SYSTEM	l	
	1200 SOUTH PINE ISLAND RO	OAD	2023
	PLANTATION	FL 33324	1. 123 JAH 24
6. The name and street address of the new registered ag (if changed): Corporation Service Company		red agent (if changed) and /or registered office	ce AH (3)
	1201 Hays Street		55
		P.O. Box NOT acceptable	
	Tallahassee	FL 32301	
The street addre as changed will	ess of its registered office and the be identical.	e street address of the business office of its	registered agent,
Such change wa authorized by th	as authorized by resolution duly and board, or the corporation has b	adopted by its board of directors or by an opeen notified in writing of the change.	fficer so
Xie P	2 agni	Jill Cilmi, Vice Pres	
I hereby accept I further agree to of my duties, an document is bei corporation has	te of an officer of director the appointment as registered as to comply with the provisions of the d I am familiar with and accept the fing filed merely to reflect a chang to been notified in writing of this conservice Company	Printed or typed hame and title gent and agree to act in this capacity. all statutes relative to the proper and comp the obligation of my position as registered ge in the registered office address, I hereby thange.	
By: Drae		01/23/2023	
	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	Asst. Vice President	_	
T	yped or Printed Name		
	* * * FILI	NG FEE: \$35.00 * * *	

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