F93000004389

Office Use Only



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R-A. Cho-se.



	ACCOUNT NO.	:	072100000032
	REFERENCE	:	
	AUTHORIZATION	:	Spellelenan
	COST LIMIT	:	.
ORDER DATE :	October 5, 2006		
ORDER TIME :	1:19 PM		
ORDER NO. :	505970-035		
CUSTOMER NO:	4359638		,
	CHANGE OF A	GEN	<u>:</u>
NAME :	SYNOPSYS, INC	•	
PLEASE RETURN XX PLAIN	THE FOLLOWING AS	PF	PROOF OF FILING:
CONTACT PERSON	N: Dina Davis T	har	ink you!

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 organized under the laws of the State of Delaware			
· ·	r to change its registered office or registered agent, or both, in the State of Florida.			
	he corporation: SYNOPSYS, INC.			
2. The principal	office address: 700 East Middlefield Road, Mountain View, CA 94043			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: September 28, 1993 Document number: F93000004389			
	I street address of the current registered agent and registered office on file with the tment of State:			
	C T Corporation System			
	1200 South Pine Island Road			
•	Plantation, FL 33324			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	1201 Hays Street PR 3:			
	(P.O. Box NOT acceptable)			
	Tallahassee, FL 32301			
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.			
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.			
	Christophes F. Sadeshian, Asst. Secretary (Printed or typed name and title)			
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.			
By: MC	Service Company Lulle R Lanuary (Date) Description (Date)			
If signing on behalf of an entity:				
Michelle R. Vannoy, Asst. VP				
(1	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