Division of Corporations

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.

(((H23000380219 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 : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

REGISTERED AGENT CHANGE SYNOPSYS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

1.0 = 7 %

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

statement of cha	nge is submitted for a corpor	02, 617.0502, 607.1508, or 617.1508, Florida Stat ation organized under the laws of the State of Dela ce or registered agent, or both, in the State of Flor	aware
	he corporation: Synopsys, Inc	•	,
	·	EFIELD RD., MOUNTAIN VIEW, CA 94043	
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 09/28/	Document number: F930000043	39
5. The name and		registered agent and registered office on file with t	
	CORPORATION SERVICE	COMPANY	
	1201 HAYS STREET	2525	23 1.0
	TALLAHASSEE, FL 32301-1	2525	
6. The name and (if changed):	street address of the new reg	sistered agent (if changed) and /or registered office	59 :11 !! !
	United Agent Group Inc.		4.5
	801 US Highway 1		
	North Palm Beach, FL 33408	P.O. Box NOT acceptable	
The street addre as changed will	ss of its registered office and be identical.	I the street address of the business office of its re	gistered agent,
Such change wa authorized by th	s authorized by resolution de e board, or the corporation h	uly adopted by its board of directors or by an offinal been notified in writing of the change.	icer so
Typ	e of an officer or director	Tymberlyn Teefey, Attorney-in-Fact	
l hereby accept I furthér agrée t of my duties, and document is beit	the appointment as registere	d agent and agree to act in this capacity, s of all statutes relative to the proper and comple ept the obligation of my position as registered ag hange in the registered office address, I hereby c	te performance ent. Or, if this onfirm that the
Typ	aberlyn Teefey	11/01/2023	
Sign	ature of Segistered Agent	Date	
If signing on bel	nalf of an entity:		
-	y, Special Secretary		
Ty	ped or Printed Name	IL INC FFF: \$35.00 * * *	