F94000005560

(Requestor's Name)				
(Address)				
(
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
0.07.10.1				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special mentalisms to 1 ming similar				

Office Use Only



400367394784

99/10/21 --0.021--00/ **85.00

2021 JUN TO PH 12: 58



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: June 8, 2021

Order#: 833378-007

Re: ATTACHMATE CORPORATION

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35....

Please take the following action:

XX File in your office on a routine basis.

XX Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

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

statement of cha	inge is submitted for a corporation orga	anized under the laws of the State of <u>V</u> stered agent, or both, in the State of Flo	Vashington
	the corporation: ATTACHMATE CORP		7 1666.
2. The principal	office address: 705 5th Avenue South	, Suite 1100, Seattle, WA 98104	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 10/26/1994	Document number: F9400000	5560
	I street address of the current registered tment of State: (If resigned, enter resig	l agent and registered office on file with ned)	the
	C T Corporation System		
	1200 South Pine Island Road	3	2021 JUH 10
	Plantation, FL 33324	2	
6. The name and street address of the new registered agent (if changed) and /or registered of (if changed):			10 PM 12: 58
	Corporation Service Company		2: 5
	1201 Hays Street		8
	P.O. E	Box_NOT acceptable	
	Tallahassee	FL 32301	
The street addre	ess of its registered office and the stree be identical.	et address of the business office of its	registered agent,
Such change was author(ze) by the	as authorized by resolution duly adopt he board, or the corporation has been i	ted by its board of directors or by an of notified in writing of the change.	fficer so
Xiel	LE GONE	Jill Cilmi, Vice President	
Signatu	re of an officer or director	Printed or typed name and title	
I further agree of my duties, ar document is bei corporation has	the appointment as registered agent of the comply with the provisions of all stand I am familiar with and accept the of ing filed merely to reflect a change in seen notified in writing of this change in Service Company!	atutes relative to the proper and comp bligation of my position as registered of the registered office address, I hereby	lete performance agent. Or, if this confirm that the
Ву:	y M Lei	06/01/2021	
	nature of Registered Agent	Date	_
If signing on be	chalf of an entity:		
Ami M. Casper,	Asst. Vice President		
т	yped or Printed Name		

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