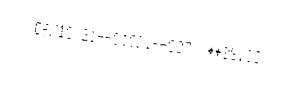
P20133

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

Office Use Only



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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#: 833378-219

Re: MICRO FOCUS SOFTWARE INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

 $XX_{\underline{}}$ File in your office on a routine basis.

XX Issue Proof of Filing.

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	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statu organized under the laws of the State of Del registered agent, or both, in the State of Floric	aware
1. The name of t	the corporation: MICRO FOCUS S	SOFTWARE INC.	
2. The principal	office address: 1800 South Novell	Place, Provo, UT 84606	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 07/20/1988	Document number: P20133	
	I street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on file with the esigned)	ie
	C T Corporation System		
	1200 South Pine Island Road		2021
	Plantation, FL 33324	<u>.</u> 	
6. The name and (if changed):	ed agent (if changed) and /or registered office	2021 JUH 10 PH 12: 51	
	Corporation Service Company	· · · · · · · · · · · · · · · · · · ·); S
	1201 Hays Street		
		P.O. Box NOT acceptable	
	Tallahassee	FL 32301	
as changed will	be identical.	street address of the business office of its reg	_
Such change was author(ze) by the	as authorized by resolution duly and board, or the corporation has be	dopted by its board of directors or by an offi- een notified in writing of the change.	cer so
Xie	. E aoni	Jill Cilmi, Vice President	
Signatu	re of an officer or director	Printed or typed name and title	
I further agree to of my duties, an document is bei corporation has	to comply with the provisions of a	ent and agree to act in this capacity. Il statutes relative to the proper and complet he obligation of my position as registered ag e in the registered office address. I hereby co hange	te performance ent. Or, if this onfirm that the
ву:	i m Leil	06/01/2021	
	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	Asst. Vice President		
l :	yped or Printed Name		

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