2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 858443

Entity Name: ROYAL BANK OF CANADA

Current Principal Place of Business:

1 PLACE VILLE MARIE

MONTREAL, QUEBEC H3C 3A9

Current Mailing Address:

1 PLACE VILLE MARIE MONTREAL. H3C 3A9 CA

FEI Number: 13-5357855 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED May 12, 2020

Secretary of State

8434852842CC

Officer/Director Detail:

Title DIRECTOR Title CHIEF FINANCIAL OFFICER

NameBEATTIE, WILLIAM GEOFFREYNameBOLGER, ROD AAddress1 PLACE VILLE MARIEAddress1 PLACE VILLE MARIECity-State-Zip:MONTREAL H3C 3A9City-State-Zip:MONTREAL H3C 3A9

Title ASSISTANT SECRETARY Title DIRECTOR

Name MORETTI, DANIELA Name CHRISHOLM, ANDREW ALLEN

Address 1 PLACE VILLE MARIE Address 1 PLACE VILLE MARIE

City-State-Zip: MONTREAL H3C 3A9

City-State-Zip: MONTREAL H3C 3A9

Title DIRECTOR Title DIRECTOR

NameCOTE, JACYNTHENameDARUVALA, TOOS NOSHIRAddress1 PLACE VILLE MARIEAddress1 PLACE VILLE MARIECity-State-Zip:MONTREAL H3C 3A9City-State-Zip: MONTREAL H3C 3A9

Title DIRECTOR Title DIRECTOR

NameDENISON, DAVID FRANCISNameGEORGE, RICHARD LEEAddress1 PLACE VILLE MARIEAddress1 PLACE VILLE MARIECity-State-Zip:MONTREAL H3C 3A9City-State-Zip: MONTREAL H3C 3A9

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIELA MORETTI ASSISTANT SECRETARY 05/12/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name LABERGE, ALICE DELORES Name MCCAIN, MICHAEL HARRISON

Title

DIRECTOR

Address 1 PLACE VILLE MARIE Address 1 PLACE VILLE MARIE

City-State-Zip: MONTREAL H3C 3A9

City-State-Zip: MONTREAL H3C 3A9

Title DIRECTOR

Name MUNROE-BLUM, HEATHER ANNE Name RENYI, THOMAS ANDREW

Address 1 PLACE VILLE MARIE Address 1 PLACE VILLE MARIE

City-State-Zip: MONTREAL H3C 3A9

City-State-Zip: MONTREAL H3C 3A9

Title DIRECTOR Title DIRECTOR

Name SONSHINE, EDWARD Name TAYLOR, KATHLEEN PATRICIA

Address 1 PLACE VILLE MARIE Address 1 PLACE VILLE MARIE

City-State-Zip: MONTREAL H3C 3A9

City-State-Zip: MONTREAL H3C 3A9

Title DIRECTOR Title DIRECTOR

Name VAN KRALINGEN, BRIDGET ANNE Name VANDAL, THIERRY

Address 1 PLACE VILLE MARIE Address 1 PLACE VILLE MARIE

Address 1 PLACE VILLE MARIE

City-State-Zip: MONTREAL H3C 3A9

Address 1 PLACE VILLE MARIE

City-State-Zip: MONTREAL H3C 3A9

Title SECRETARY Title DIRECTOR, PRESIDENT

Name HELLWIG LOUIS, ESTHER Name MCKAY, DAVID IAN
Address THREE WORLD EINANCIAL CENTER Address 1 PLACE VILLE MARIE

Address THREE WORLD FINANCIAL CENTER 200 VESEY STREET Address 1 PLACE VILLE MARIE 1 PLACE VILLE MARIE 200 VESEY STREET City-State-Zip: MONTRFAL H3C 3A9

200 VESEY STREET City-State-Zip: MONTREAL H3C 3A9
City-State-Zip: NEW YORK NY 10281