

Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16-49</u>, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

R.I. DEPT. OF STATE BUS SYCS DIV

purpose submits the following statement:		
The name of the limited liability company is:		
DXC Technology Services LLC		
Is this company organized in its state or country of form	ation as a low-profit limited liabil	ity company? Yes No
The name, if different, under which it proposes to register a	and transact business in Rhode I	sland is:
2. The LLC is organized under the laws of:	Delaware	
3. The date of its organization is:	07/18/2017	
And the period of its duration is: CHECK ONLY ONE BOX		
Perpetual (on-going)		
Date certain for dissolution		
4. The name and address of the resident agent/office in Rh	ode Island is:	
Agent Name C T Corporation System		
Street Address (NOT a P.O. Box) 450 Veterans Memorial Par	kway, Suite 7A	
City/Town East Providence	State RHODE ISLAND	Zip Code 02914
The Department of State is appointed the agent of the for time there is no resident agent or if the resident agent cannot diligence.	reign limited liability company fo not be found or served following	r service of process if at any the exercise of reasonable
6. The address of any office required to be maintained in the liability company is organized is:	e state or other jurisdiction unde	er the laws of which the limited
1209 Orange St, Wilmington, DE 19801		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

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BY \$ 309440

7. The mailing address for the limited liability company is:				
1775 Tysons Blvd, 9th Floor, Tysons Corner, VA 22102				
8, Management of the Limited Liability Company:				
The limited liability company is managed:				
🗵 By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)				
By one (1) or more managers (List managers below)				
MANAGER	ADDRESS			
9. This application is accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is formed that is dated within 60 days of the filing of this document.				
10. Date when this application for Certificate of Registration will be effective: CHECK ONLY ONE BOX				
□ Date received (Upon filing)				
Later effective date (Date must be no more than 30 days from the day of filing)				
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.				
Type or Print Name of LLC		Date		
DXC Technology Services LLC		7-31-17		
Signature of Authorized Person H.C. Charlese Diao, Manager				

signing on behalf of the member Enterprise Services, LLC

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DXC TECHNOLOGY SERVICES LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE THIRTY-FIRST DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 202977250

Date: 07-31-17