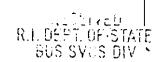
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State of Rhode Island

Department of State - Business Services Division



Application for Amended Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$75.00 (\$235 for an increase in authorized shares)

2021 MAR -4 PM 2: 46

the following statement:	prity to transact business in t	signed foreign corporation hereby applies for an he State of Rhode Island, and for that purpose submits			
Entity ID Number:	2. The name of the corporation is:				
000794202	Code42 Softwa	Code42 Software, Inc.			
It is incorporated under the laws of: Delaware		4. List the date the Certificate of Authority was issued by the RI Department of State:			
		11/1/2012			
5. If the entity's name has state the new name:	s changed,				
		Check box to indicate no change			
6. The name, if different,	which it elects to use in R	thode Island is:			
"incorporated," or "limited above corporate endings (b) If the corporate name	 i," or an abbreviation therefor use in Rhode Island: is not available in Rhode 	of incorporation does not contain the word "corporation," "company," eof, then list the name of the corporation with the addition of one of the Island, then set forth below the fictitious name under which the			
· ·	s changing complete the	as stated in the "Fictitious Business Name Statement" to be filed with this following section: "The new purpose should include ALL activity to be			

MAIL TO:

Division of Business Services

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

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

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

FILED

MAR 0 4 2021

FORM 161 - Reveled 38/2020 1. A. 2. 46 P.W

NUMBER OF SHARES	CLASS	SERIES	PAR VALUE	PAR VALUE OR STATE NO PAR VALUE	
24968400	PWP	В	.001		
16778301	PWP	Α	.001		
114100000	CWP		.01		
Check the box to indicate	e an attachment		Check	box to indicate no change	$\overline{\ \ }$
of the corporation to be le	ocated within this sta oration to be owned	portion that the estimated value during the following year lidering the following year, where the following year, which we will not the following year.	pears to the value	0 %	
8b. An estimate, as a pe be transacted by the corp the following year compa corporation during the fo	04%				
9. As required by RIGL 7	-1 2-105, the corpora	ation has paid all fees and ta	xes.		
10. Except as herein modereby confirmed, ratified	dified, the original Ap	plication for Certificate of Au y reference into this Applicat	thority continues in ion for Amended Ce	full force and effect and is ertificate of Authority.	
11. Date when the Amen	ded Certificate of Aut	thority will be effective: CHE	CK ONE BOX ONL	Υ	
✓ Date received (Upor Later effective date	.	ore than 90 days from the da	te of filing)		
Under penalty of perjury, including any accompany	I declare and affirm ving attachments, and	that I have examined this Ap d that all statements contain	plication for Amend ed herein are true a	ed Certificate of Authority, and correct.	
Name of Authorized Officer of the Corporation			Date		
David Huberman			3/4/2021		
Signature of Authorized (by: Werman			

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

March 04, 2021 02:46 PM

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

