

1.) CORPORATION NAME: **Sage Software International, Inc.** DUE DATE: **3/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **CORPORATION SERVICE COMPANY** SCC ID NO: **05000179**
Bank of America Center, 16th Floor
1111 East Main Street

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE: **RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION: **VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6561 IRVINE CENTER DRIVE

CITY/ST/ZIP: IRVINE, CA 92618

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PASCAL HOUILLON		
TITLE: PRESIDENT		
ADDRESS: 6561 IRVINE CENTER DRIVE		
CITY/ST/ZIP/CO: IRVINE, CA 92618		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MARC SCHEIPE		
TITLE: TREASURER		
ADDRESS: 1715 NORTH BROWN ROAD		
CITY/ST/ZIP/CO: LAWRENCEVILLE, GA 30043		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: RACHEL GERVIN		
TITLE: SECRETARY		
ADDRESS: 1715 NORTH BROWN ROAD		
CITY/ST/ZIP/CO: LAWRENCEVILLE, GA 30043		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: BRIAN TRAN		
TITLE: ASST SECRETARY		
ADDRESS: 6561 IRVINE CENTER DRIVE		
CITY/ST/ZIP/CO: IRVINE, CA 92618		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ BRIAN TRAN	BRIAN TRAN, ASST SECRETARY	3/23/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.