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| ne) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| hone #) | | | | |
| MAIL. | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| eates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper acasper5@cscinfo.com

Date: April 2, 2014

Order#: 022573-094

Re: QTS REALTY TRUST, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX 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
2711 Centerville Road, Suite 400

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.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | provisions of sections 607.0502, 617.0 ange is submitted for a corporation org r to change its registered office or reg | ganized under the laws of th | e State of Maryland |
|--|---|---|--|
| | the corporation: QTS REALTY TRUS | 9 | |
| | office address: 12851 Foster Street, | | |
| 3. The mailing a | ddress (if different): | | |
| 4. Date of incorp | poration/qualification: 02/24/2014 | Document number | F14000000849 |
| | I street address of the current registere tment of State: (If resigned, enter resigned) | | e on file with the |
| | Capitol Corporate Services Inc | | * |
| | 155 Office Plaza Drive, Suite A | | |
| | Tallahassee | FL 32301 | ين سر سر مهرسه در مهرسه |
| 6. The name and (if changed): | I street address of the new registered a | gent (if changed) and /or reg | |
| | Corporation Service Company | | |
| | 1201 Hays Street | | |
| | | OT acceptable | |
| | Tallahassee | FL 32301 | _ |
| The street address changed will | ess of its registered office and the stre be identical. | et address of the business o | office of its registered agent, |
| Such change was authorized by the | s authorized by resolution duly adop the board, or the corporation has been | ed by its board of directors notified in writing of the ch | or by an officer so ange. |
| Signatu | et of an officer or director | Dona Priebe, Vice Pres | |
| I hereby accept I further agree to performance of agent. Or, if the hereby confirm | the appointment as registered agent o comply with the provisions of all st my duties, and I am familiar with and is document is being filed merely to rethat the corporation has been notified in Service Company | and agree to act in this cap atutes relative to the prope I accept the obligation of m effect a change in the regist | acity. r and complete v position as registered |
| By: | in august | 04/02/2014 | |
| 7-9 | nature of Registered Agent | Date | e |
| If signing on bel | half of an entity: | | |
| | , Assistant Vice President | | |
| 15 | ped or Printed Name | | |

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