## 804606

(Re	questor's Name)	
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		





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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: Janis M. Smith janis.smith@cscglobal.com

Date: December 14, 2016

Order#: 378938-018

Re: HEXION 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: Janis M. Smith 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	ange is submitted for a con	2.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this poration organized under the laws of the State of New Jersey office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Hexion In	с.	
		Broad Street, Columbus, OH 43215	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: /	0-4-1936 Document number: 804606	
	d street address of the curr rtment of State: (If resigne	ent registered agent and registered office on file with the d, enter resigned)	
	NRAI Services, Inc.		
	120 South Pine Island Road		
	Plantation	Oad FL 33324	
6. The name and (if changed):	d street address of the new	registered agent (if changed) and /or registered office	
	Corporation Service Cor	трапу	
	1201 Hays Street		
	Tallahassee	P.O. Box NOT acceptable  FL 32301	
		FL 32301	
The street addr as changed will	ess of its registered office I be identical.	and the street address of the business office of its registered agent,	
Such change wathorized by t	as authorized by resolution he board, or the corporati	on duly adopted by its board of directors or by an officer so on has been notified in writing of the change.	
Sie e	. Cieni	Jill Cilmi, Vice President	
Signati	are of an officer or director	Printed or typed name and title	
I further agree performance of agent. Or, if th hereby confirm	to comply with the provis my duties, and I am fami	tered agent and agree to act in this capacity. ions of all statutes relative to the proper and complete liar with and accept the obligation of my position as registered I merely to reflect a change in the registered office address, I been notified in writing of this change.	
,	· L-Kuby	12/05/2016	
Sig	gnature of Registered Agent	Date	
If signing on be	ehalf of an entity:		
Grace E. Kirby	, Assistant Vice President		
	Typed or Printed Name		

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