F08000002015

(Re	questor's Name)				
(Ad	dress)				
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(Cit	ty/State/Zip/Phone	e #)			
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(Document Number)					
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RARDONS

APR 0 7 2016

I ALBRITTON



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: March 31, 2016

Order#: 074792-005

Re: SILKROAD TECHNOLOGY, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

<u>XX</u> File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Grace Kirby 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 ange is submitted for a corporation o er to change its registered office or re	rganized under the la	ws of the State of	of DE	-
1. The name of	the corporation: SILKROAD TECHN	OLOGY, INC.			
	office address: 100 S Wacker Drive		IL 60606		
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification: 04/09/2008	Document	number: F0800	0002015	
	d street address of the current register rtment of State: (If resigned, enter res		ed office on file	with the	
	C T Corporation System			_	
	1200 South Pine Island Road			_	
	Plantation	FL	33324	- 21	
6. The name and (if changed):	d street address of the new registered	agent (if changed) an	d /or registered	office PR-4	outstand () () () ()
•	Corporation Service Company				177
	1201 Hays Street	NOT acceptable		PH 2: 04	(
	Tallahassee	FL FL	32301	्रांति 🗣	
The street address changed will	ess of its registered office and the st be identical.	reet address of the bu	siness office of	its registered ager	nt,
Such change wa authorized by th	as authorized by resolution duly ado ne board, or the corporation has been	pted by its board of on notified in writing of	directors or by a of the change.	n officer so	
000		Dona Priebe, V	ice President		
I hereby accept I further agree of performance of agent. Or, if the hereby confirm	the appointment as registered agen to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notifi on Service Company	t and agree to act in statutes relative to th nd accept the obligat	ie proper and co tion of my position	omplete on as registered	
By: Drace	Z-Kubi.	03/31/2016			
_	nature of Registexed Agent		Date		
	half of an entity:				
	Assistant Vice President				
17	yped of rinked Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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