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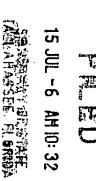
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(Ad	dress)	<u> </u>				
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(City/State/Zip/Phone #)						
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(Bu	isiness Entity Nar	ne)				
(Document Number)						
Certified Copies Certificates of Status						
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Special Instructions to	Filing Officer:					

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: Ellen Rosaio ellen.rosaio@cscglobal.com

Date: June 29, 2015

Order#: 673480-015

Re: STV/SILVER & ZISKIND ARCHITECTS, P.C.

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: Ellen Rosaio

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

	•	502, 617.0502, 607.1508, or 6 ration organized under the la				
	-	ice or registered agent, or bot				•
1. The name of t	the corporation: STV/SILVER	R & ZISKIND ARCHITECTS,	P.C., INC.			
7 The principal	office address: 225 PARK A	VENUE SOUTH, NEW YOR	K, NY 10003			
z. The principal	office address					
3. The mailing a	ddress (if different): 225 PA	RK AVENUE SOUTH, NEW	YORK, NY 10003	3		
4. Date of incorp	poration/qualification: 06/25	Document	number: F09000	002569		
5. The name and		registered agent and register				
	C T CORPORATION SYST	TEM		_		
	1200 SOUTH PINE ISLANI	D ROAD		_		
	PLANTATION	FL	33324	_ 25 5	_	
6. The name and (if changed):		gistered agent (if changed) an	nd /or registered o		15 JUL -	
	Corporation Service Comp	any		- Ma	<u>,</u>	i NG
	1201 Hays Street			工作	AM IO:	
	Tallahassee	P.O. Box NOT acceptable	32301		ω	_
	Tundidosec		32301	- 35≯. - 35≯.	Ń	
The street address changed will	ess of its registered office ar be identical.	nd the street address of the bu	usiness office of i	ts registere	ed age	nt,
Such change wa authorized by the	as authorized by resolution one board, or the corporation	fuly adopted by its board of a has been notified in writing a	directors or by an of the change.	officer so		
) vd i	L Hall	Judith Held, Se	•			
//	ire of an officer or director		ed or typed name and (-
agent. Or, if the hereby confirm	the appointment as register to comply with the provision my duties, and I am familia is document is being filed m that the corporation has be on Service Company	red agent and agree to act in ns of all statutes relative to the r with and accept the obligat terely to reflect a change in t en notified in writing of this	this capacity. he proper and con tion of my positio he registered offi change.	mplete n as regist ce address	ered , I	
	· C-Kuby	06/29/2015				_
Sig	pusture of Registered Agent		Date			
If signing on be	half of an entity:					
Grace E. Kirby	, Assistant Vice President					
T	yped or Printed Name					

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