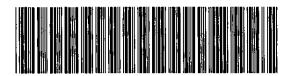
## 410000001221

(Re	equestor's Name)			
(Ad	dress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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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: Grace Kirby grace.kirby@cscglobal.com

Date: July 14, 2016

Order#: 209951-022

Re: TEXTURA CORPORATION

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: 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

		517.0502, 607.1508, or 617.1508, Florida Statutes, this norganized under the laws of the State of DELAWARE	
		registered agent, or both, in the State of Florida.	
1. The name of	the corporation: TEXTURA CORP	PORATION	
2. The principal	office address: 1405 LAKE COOK	K ROAD, DEERFIELD, IL 60015	
<del></del>			
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 03/10/2010	Document number: F10000001221	
	d street address of the current registerment of State: (If resigned, enter t	stered agent and registered office on file with the resigned)	
	C T CORPORATION SYSTEM		
	C/O C Y CORPORATION SYSTE	EM 1200 SOUTH PINE ISLAND ROAD	
	PLANTATION	FL 33324	当年
6. The name and (if changed):	d street address of the new registere	red agent (if changed) and /or registered office	
	Corporation Service Company	·	ان کشر ایستان
	1201 Hays Street		57.11
	P,O. B	Box NOT acceptable	-
	Tallahassee	FL 32301	
as changed will	be identical.	street address of the business office of its registered and opted by its board of directors or by an officer so een notified in writing of the change.	gent,
authorized by the	ne board, or the corporation has be		
Duan->H	28	Brian S. Higgins, Vice President	
I hereby accept I further agree , performance of agent. Or, if th hereby confirm Corporatio	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not on Service Company		ď
By: \ \ \ \ Sig	nature of Registered Agent	07/08/2016 Date	<del></del>
If signing on be	half of an entity:		
<u>*</u> ·	Assistant Vice President		
Ţ	yped or Printed Name *** FILIN	NG FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)