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PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nai	me)
(Do	ocument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: January 3, 2018

Order#: 993239-010

Re: THE EXONE COMPANY

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

251 Little Falls Drive 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

2018 JAN -8 \*H 12: 1

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

		92, 617.0502, 607.1508, or 617.1508, Fi ation organized under the laws of the St	· ·	
<del>-</del>	· ·	ce or registered agent, or both, in the St		<del></del>
1. The name of	the corporation: THE EXONE	COMPANY		
2. The principa	office address: 127 Industry	Boulevard, North Huntingdon, PA 156-	42	
	<del></del>	· · · · · · · · · · · · · · · · · · ·		<del></del>
3. The mailing	address (if different):		1	
4. Date of inco	rporation/qualification: 02/07/	/2013Document number: _F	13000000597	
	nd street address of the current rartment of State: (If resigned, ea	registered agent and registered office on nter resigned)	file with the	
	C T Corporation System			
	1200 South Pine Island Road	d		2018
	Plantation, FL 33324			AN
6. The name an (if changed):	•	istered agent (if changed) and /or registe	ered office	8 PH 12: 47
	Corporation Service Compar	ny		
	1201 Hays Street			
	Tallahassee	P.O. Box NOT acceptable FL 32301		
		1	<del></del>	
The street addras changed wil	ress of its registered office and I be identical.	the street address of the business office	ce of its registered	agent,
Such change wanthorized by t	as authorized by resolution du the board, or the corporation h	lly adopted by its board of directors or as been notified in writing of the chang	by an officer so	
	We of an officer or director	Loretta Benec, Secretary		<u>.</u>
I hereby accep I further agree performance o agent. Or, if the hereby confirm	t the annointment as registere	Printed or typed name of agent and agree to act in this capacity of all statutes relative to the proper as with and accept the obligation of my prefer to reflect a change in the registered in notified in writing of this change.	ts.	ed
By: Ce	mlei	01/03/2018		
	gnature of Registered Agent	Date		
	ehalf of an entity:			
<u> </u>	r, Asst. Vice President	<u> </u>		
	THEO OF FURIED INSUIC		,	

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