F95000005990

(Re	questor's Name)						
(Address)							
(Ad	dress)						
(City/State/Zip/Phone #)							
PICK-UP	WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates	s of Status					
Special Instructions to Filing Officer:							

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15 JAN 15 PH 3: 44

JAN 2 0 2015 T. CARTER



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 jsmith2@cscinfo.com

Date: January 13, 2015

Order#: 447437-002

Re: CUNINGHAM GROUP ARCHITECTURE, 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	provisions of sections of inge is submitted for a co	prporation organ	ized under the la	tws of the State of N	MN	this ———	·
	r to change its registered	0	0	,	lorida.		
1. The name of t	the corporation: CUNING	HAM GROUP A	RCHITECTURE	=, INC.			
2. The principal	office address: 201 Mai	n Street SE, Suit	e 325, Minneap	olis, MN 55414	- 		
3. The mailing a	address (if different):						
4. Date of incorp	poration/qualification; 1	2/08/1995	Document	number; F950000	05990		
	I street address of the cur tment of State: (If resign			ed office on file wi	th the		
	NRAI SERVICES, INC.						
	1200 SOUTH PINE ISL	AND ROAD				-	7.0
	Plantation		FL	33324		5 JAN	ECRE
6. The name and (if changed):	street address of the nev	w registered agen	t (if changed) an	nd /or registered offi	ice	JAN 15 PH	AASSEE.
	Corporation Service Co	mpany				ယ္	FST FST
	1201 Hays Street	DO D NOT.			,	44	ATE RIDA
	Tallahassee	P.O. Box NOT	FL	32301			
The street addre	ess of its registered offic be identical.	e and the street a	ddress of the bu	siness office of its	register	red ag	ent,
Such change wa authorized by th	s authorized by resolution board, or the corporation	on duly adopted ion has been noti	by its board of o	directors or by an o	fficer so)	
1			Dona Priebe, V	ice President			
Signatui	an officer or director		Printe	ed or typed name and title			_
I further agree to performance of a gent. Or, if thi hereby confirm to	the appointment as regi o comply with the provi my duties, and I am fam s document is being filed that the corporation has n Service Company	sions of all statu iliar with and ac	tes relative to th cent the obligat	ie proper and comp ion of my position i	olete as regis addres	tered s, I	
By: \\ \	sea deter	bile	01/07/2015				
	nature of Registered Agent			Date			
If signing on bel	half of an entity:						
Grace E. Kirby,	Asst. Vice President						
Ту	ped or Printed Name						

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