F97000004358

| (Re | equestor's Name) | | |
|---|--------------------|-------------|--|
| (Ac | ldress) | | |
| (Ac | idress) | | |
| (Ci | ty/State/Zip/Phone | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bı | ısiness Entity Nar | me) | |
| | | | |
| (Do | ocument Number) | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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JUN 2 5 2015

D CUSHING



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscqlobal.com

Date: June 15, 2015

Order#: 644961-012

Re: SOLUTIA INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Lindsey Lockard

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 ch | e provisions of sections 607.0502, 617.050 ange is submitted for a corporation organ ler to change its registered office or regist | nized under the laws of the State of | DE | |
|--|--|--|---------------------------|---------------|
| 1. The name of | the corporation: SOLUTIA INC. | | | |
| | al office address: | | | |
| 3. The mailing | address (if different): 200 South Wilcox | Drive, Kingsport, TN 37662 | | |
| 4. Date of inco | rporation/qualification: 08/19/1997 | Document number: F970000 | 004358 | |
| | nd street address of the current registered a artment of State: (If resigned, enter resigne | | ith the | |
| | C T CORPORATION SYSTEM | | | |
| | 1200 SOUTH PINE ISLAND ROAD | | | |
| | PLANTATION | FL 33324 | • | |
| 6. The name ar (if changed) | nd street address of the new registered age | ent (if changed) and /or registered of | Tice | |
| | Corporation Service Company | | . ∌ _s | |
| | 1201 Hays Street | | 5 4 | [-] |
| | | T acceptable | mann | Servenore |
| | Tallahassee | FL 32301 | | 분 전 제10일 |
| The street add as changed wi | ress of its registered office and the street Il be identical. | address of the business office of it | ts registered agen | 115 |
| Such change vauthorized by | vas authorized by resolution duly adopted the board, or the corporation has been no | d by its board of directors or by an stified in writing of the change. | officer so | |
| | | Dona Priebe, Vice President | | |
| I further agree performance of agent. Or, if the hereby confirm | of the appointment as registered agent and to comply with the provisions of all states of the first of all states of the first of the f | tutes relative to the proper and con accept the obligation of my position | aplete n as registered | |
| By: | gnature of Registered Agent | 06/08/2015 Date | | |
| | ehalf of an entity: | | | |
| Grace E. Kirby | y, Asst. Vice President | | | |
| | Typed or Printed Name | | | |

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