

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000006548

**Entity Name:** VWR INTERNATIONAL, LLC**Current Principal Place of Business:**100 MATSONFORD RD  
BLDG ONE, SUITE 200  
RADNOR, PA 19087**Current Mailing Address:**100 MATSONFORD RD  
BLDG ONE, SUITE 200  
RADNOR, PA 19087**FEI Number:** 91-1319190**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name STUBBLEFIELD, MICHAEL  
Address 100 MATSONFORD RD  
City-State-Zip: RADNOR PA 19087

Title MGR  
Name ALEXOS, NICHOLAS W  
Address 100 MATSONFORD RD  
City-State-Zip: RADNOR PA 19087

Title MGR  
Name BARCHI, ROBERT L  
Address 100 MATSONFORD RD  
City-State-Zip: RADNOR PA 19087

Title MGR  
Name BLECHSCHMIDT, EDWARD A  
Address 100 MATSONFORD RD  
City-State-Zip: RADNOR PA 19087

Title MGR  
Name DEAN, THOMPSON  
Address 100 MATSONFORD RD  
City-State-Zip: RADNOR PA 19087

Title MGR  
Name DECRESCE, ROBERT P  
Address 100 MATSONFORD RD  
City-State-Zip: RADNOR PA 19087

Title MGR  
Name JANSEN KRAEMER, HARRY M  
Address 100 MATSONFORD RD  
BLDG ONE, SUITE 200  
City-State-Zip: RADNOR PA 19087

Title MANAGER  
Name DEL SALTO, CARLOS  
Address 100 MATSONFORD RD  
BLDG ONE, SUITE 200  
City-State-Zip: RADNOR PA 19087

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARTIN GOLDMAN

VP TAX

03/29/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title                   MANAGER  
Name                 FORBES LIEBERMAN, PAMELA  
Address             100 MATSONFORD RD  
                       BLDG ONE, SUITE 200  
City-State-Zip:   RADNOR PA 19087

Title                   MANAGER  
Name                 ZOLLARS, ROBERT J  
Address             100 MATSONFORD RD  
                       BLDG ONE, SUITE 200  
City-State-Zip:   RADNOR PA 19087

Title                   MANAGER  
Name                 SULLIVAN, TIMOTHY P  
Address             100 MATSONFORD RD  
                       BLDG ONE, SUITE 200  
City-State-Zip:   RADNOR PA 19087

Title                   VP TAX  
Name                 GOLDMAN, MARTIN  
Address             100 MATSONFORD ROAD  
                       STE 200, BLDG 1  
City-State-Zip:   RADNOR PA 19087-6660