2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09256

Entity Name: EMD MILLIPORE CORPORATION

Current Principal Place of Business:

400 SUMMIT DRIVE
BURLINGTON, MA 01803

Current Mailing Address:

PO BOX 80600
C/O DMA
INDIANAPOLIS, IN 46280 US

FEI Number: 04-2170233

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR	Title	ASST. TREASURER
Name	HUTCHINSON, DAVID	Name	O'DONNELL, ANTHONY
Address	400 SUMMIT DRIVE	Address	400 SUMMIT DRIVE
City-State-Zip:	BURLINGTON MA 01803	City-State-Zip:	BURLINGTON MA 01803
Title	VP	Title	TREASURER, DIRECTOR, VP
Name	IVA, MORSE	Name	ELLIOTT, MONICA
Address	400 SUMMIT DR.	Address	400 SUMMIT DRIVE
City-State-Zip:	BURLINGTON MA 01803	City-State-Zip:	BURLINGTON MA 01803
Title	ASSISTANT SECRETARY	Title	VP
Name	TANNOCH-MAGIN, VIVIEN	Name	WIRTH, JEAN CHARLES
Address	400 SUMMIT DRIVE	Address	400 SUMMIT DRIVE
City-State-Zip:	BURLINGTON MA 01803	City-State-Zip:	BURLINGTON MA 01803
Title	SECRETARY	Title	VP
Name	HONG, SANGWHA	Name	LANG, DIRK
Address	400 SUMMIT DRIVE	Address	400 SUMMIT DRIVE
City-State-Zip:	BURLINGTON MA 01803	City-State-Zip:	BURLINGTON MA 01803

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MONICA ELLIOTT   TREASURER, DIRECTOR, VP   04/17/2024

Electronic Signature of Signing Officer/Director Detail   Date