## 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F9800000567 ENGINEERED POLYMER SOLUTIONS, INC. Principal Place of Business Mailing Address

## Apr 25, 2000 8:00 am Secretary of State 04-25-2000 90078 046 \*\*\*150.00

EET SOUTH N 55415	1101 THIRD STREET SOUTH MINNEAPOLIS MN 55415-1211				. I	4 & V		
ace of Business	3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, etc.			<u></u>		DO NOT WRIT	E IN THI	S SPACE	
City & State City & State			<b>4.</b> F	El Number 41-1770027	,	<u> </u>	Applied For Not Applicable	
Country	Zip	Zip Country		5. 0	Certificate of Status Desired			
6Name and Address of Current	Registered Agent			7.~N	lame and Address of New R	egistere	Agent	
			Vame		···			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			Street Address (P.O. Box Number is Not Acceptable)					
		(	City			F	L Zip Co	ode
named entity submits this statement fo	or the purpose of changing its	registered	office or regist	ered age	ent, or both, in the State of Flo	rida.		
Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Ag	jent signature requir	ed when re	instating)	DATE		
Tax filing requirement and elects to do so After MAY 1, 2		000 Fee wil	l be \$550.00	ate	Trust Fund Contribution	n.	☐ Ádo	.00 May Be led to Fees
	DIRECTORS	12.		AD	DITIONS/CHANGES TO OFF	ICERS AI	VD DIRECTO	
LINDBERG, STEVEN C 1400 NORTH STATE STREET	☐ Delete						☐ Chang	e 🗌 Addition
VD ROMPALA, RICHARD M 1101 THIRD STREET SOUTH	☐ Delete						☐ Change	e 🔲 Addition
S ENGH, ROLF 1101 THIRD STREET SOUTH	☐ Delete	TITLE NAME STREET A	DDRESS	. ,,			☐ Chang	e Addition
CD BRANDENBURGER, LARRY B 1101 THIRD STREET SOUTH	☐ Delete						Chang	e Addition
T WEISS, DEBORAH D 1101 THIRD STREET SOUTH MINNEAPOLIS MN 55415	☐ Delete	1	1				☐ Chang	e 🗌 Addition
	☐ Delete	TITLE NAME STREET A	DORESS			,	☐ Chang	e 🗌 Addition
	Country  Country  Country  Country  Corporation System SOUTH PINE ISLAND ROAD TATION FL 33324  Command entity submits this statement for signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OFF	Ace of Business  3. Mailing Address 4, etc.  City & State  Country  Zip  Corporation System SOUTH PINE ISLAND ROAD TATION FL 33324  Corporation is eligible to satisfy its Intangible and bate of applicable.  Corporation is eligible to satisfy its Intangible and bate of Agent Make Check Payal  OFFICERS AND DIRECTORS  PD  UINDBERG, STEVEN C 1400 NORTH STATE STREET  MARENGO IL  VD  ROMPALA, RICHARD M 1101 THIRD STREET SOUTH  MINNEAPOLIS MN  S  Delete  ENGH, ROLF 1101 THIRD STREET SOUTH  MINNEAPOLIS MN  T  WEISS, DEBORAH D 1101 THIRD STREET SOUTH  MINNEAPOLIS MN  T  WEISS, DEBORAH D 1101 THIRD STREET SOUTH  MINNEAPOLIS MN  T  Delete  Delete  Delete	Acc of Business  3. Mailing Address 4, etc.  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Zip  Country  Zip  Country  CORPORATION SYSTEM SOUTH PINE ISLAND ROAD TATION FL 33324  Commanded entity submits this statement for the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and title if applicable.  (NOTE: Registered Agent in the purpose of changing its registered agent and	Assets Minneapolis Mn 55415-1211  Accept of Business	MINNEAPOLIS MN 55415-1211  acce of Business  3. Mailing Address 4, etc.  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Zip  Country  Street Address of Current Registered Agent  Name  CORPORATION SYSTEM SOUTH PINE ISLAND ROAD TATION FL 33324  City  City  Attention is elligible to satisfy its Intangible equirement and elects to do so.  a on back)  After MAY 1, 2000 Fee will be \$550.00  Make Check Payable to Department of State  OFFICERS AND DIRECTORS  PD  LINDBERG, STEVEN C  1400 NORTH STATE STREET  MARENGO IL  VD  ROMPALA, RICHARD M  1101 THIRD STREET SOUTH  MINNEAPOLIS MN  S  Delete  TITLE  NAME  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Accord Business  3. Mailing Address  4. FEI Number  Country  Stroat Address of Current Registered Agent  Name  Stroat Address (P.O. Box Number is Not Acceptable  Stroat Address (P.O. Box Number is Not Acceptable  City  named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fic  City  named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fic  City  named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fic  City  named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fic  City  named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fic  City  named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fic  City  Interval agent agent agent and the facility agent agent and the facility agent ag	Accord Business  3. Mailing Address  4. FEI Number  41-1770027  Country  Zip  Country  Zip  Country  Zip  Country  Sirest Address of Status Desired  Anne and Address of Current Registered Agent  Name  CORPORATION SYSTEM  SOUTH PINE ISLAND ROAD  TATION FL 33324  City  Framed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  Sirest Address (P.C. Box Number is Not Acceptable)  City  Framed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  City  Framed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  City  Framed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  City  Framed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  City  Framed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  City  Framed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  City  Framed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  Telephone registered agent, or both, in the State of Florida.  In the State Address (P.C. Box Number is Not Acceptable)  DATE Registered Agent agents and the retribution.  The Market Agents agents and the retrib	As State   Suite, Apt. #, etc.   Do NOT WRITE IN THIS SPACE

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

Derivar D. Hers	orth D. Weigs
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Treasurer

4-17-2000