2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F99000006205 Mar 06, 2000 8:00 am 1. Entity Name **Secretary of State** KAY CHEMICAL COMPANY 03-06-2000 90080 031 ***150.00 Principal Place of Business Mailing Address 8300 CAPITAL DRIVE **6300 CAPITAL DRIVE GREENSBORO NC 27409** GREENSBORO NC 27409 [[0032670 3. Mailing Address 2. Principal Place of Business 370 Wabasha St. N. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Agt. #, etc Applied For 4. FEI Number City & State City & State 56-0791582 MNNot Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required ЦSA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE BAKER, DOUG NAME NAME STREET ADDRESS STREET ADDRESS 8300 CAPITAL DRIVE CITY-ST-ZIP CITY-ST-ZIP GREENSBORO NC ☐ Change Addition asd ☐ Delete TITLE TITLE BELL, LAWRENCE T NAME STREET ADDRESS 370 WABASHA ST., N. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST PAUL MN Delete Change ☐ Addition TITLE FORSYTHE, JOHN G NAME NAME STREET ADDRESS 370 WABASHA ST., N. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST PAUL MN ☐ Change ☐ Addition ☐ Delete TITLE TITLE FRITZE, STEVEN L NAME NAME STREET ADDRESS STREET ADDRESS 370 WABASHA ST., N. CITY-ST-ZIP CITY-ST-ZIP ST PAUL MN Change ☐ Addition ☐ Detete TITLE TITLE HARRIS, GEORGE NAME NAME STREET ADDRESS STREET ADDRESS 8300 CAPITAL DRIVE CITY-ST-ZIP CITY-ST-ZIP **GREENSBORO NC ASD** ☐ Change Addition ☐ Delete TITLE TITLE IVERSON, KENNETH A NAME NAME 370 WABASHA ST N STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST PAUL MN

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowere.

SIGNATURE: