

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000002611

FILED
Apr 13, 2012
Secretary of State

Entity Name: EMERALD PERFORMANCE MATERIALS, LLC

Current Principal Place of Business:

2020 FRONT STREET, SUITE 100
CUYAHOGA FALLS, OH 44221

New Principal Place of Business:

2020 FRONT STREET, SUITE 100
CUYAHOGA FALLS, OH 44221 US

Current Mailing Address:

2020 FRONT STREET, SUITE 100
CUYAHOGA FALLS, OH 44221

New Mailing Address:

2020 FRONT STREET, SUITE 100
CUYAHOGA FALLS, OH 44221 US

FEI Number: 20-4419928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: EPM CAROLINA CHEMICAL HOLDING CORP.
Address: 2020 FRONT STREET, SUITE 100
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

Title: MGRM
Name: EPM FOAM CONTROL HOLDING CORP.
Address: 2020 FRONT STREET, SUITE 100
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

Title: MGRM
Name: EPM HILTON DAVIS HOLDING CORP.
Address: 2020 FRONT STREET, SUITE 100
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

Title: MGRM
Name: EPM KALAMA CHEMICAL HOLDING CORP.
Address: 2020 FRONT STREET, SUITE 100
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

Title: MGRM
Name: EPM POLYMER ADDITIVES HOLDING CORP.
Address: 2020 FRONT STREET, SUITE 100
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

Title: MGRM
Name: EPM SPECIALTY POLYMERS HOLDING CORP.
Address: 2020 FRONT STREET, SUITE 100
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: LAURA LOUIS

POA

04/13/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date