

**2013 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 BROCKE-BENZ, MANUEL  
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 SALTON, 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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MANUEL BROCKE-BENZ

**MANAGER**

**03/25/2013**

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           SULLIVAN, TIMOTHY P  
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