

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000004286

Entity Name: OWENS CORNING INSULATING SYSTEMS, LLC**Current Principal Place of Business:**ONE OWENS CORNING PARKWAY
TOLEDO, OH 43659**Current Mailing Address:**ONE OWENS CORNING PARKWAY
TOLEDO, OH 43659**FEI Number:** 37-1525228**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 LYONS, JONATHAN
Address ONE OWENS CORNING PARKWAY
City-State-Zip: TOLEDO OH 43659

Title MGR
Name DANA, CHARLES E
Address ONE OWENS CORNING PARKWAY
City-State-Zip: TOLEDO OH 43659

Title P
Name DANA, CHARLES E
Address ONE OWENS CORNING PARKWAY
City-State-Zip: TOLEDO OH 43659

Title S
Name CHRISTY, JOHN W
Address ONE OWENS CORNING PARKWAY
City-State-Zip: TOLEDO OH 43659

Title T
Name LYONS, JONATHAN
Address ONE OWENS CORNING PARKWAY
City-State-Zip: TOLEDO OH 43659

Title VP
Name MIKELONIS, JOSEPH J
Address ONE OWENS CORNING PARKWAY
City-State-Zip: TOLEDO OH 43659

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH J. MIKELONIS**VP****04/14/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date