

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000005550

Entity Name: AIRGAS USA, LLC

Current Principal Place of Business:

SUITE 100
259 N. RADNOR-CHESTER RD.
RADNOR, PA 19087-5283

Current Mailing Address:

SUITE 100
259 N. RADNOR-CHESTER RD.
RADNOR, PA 19087-5283 US

FEI Number: 45-3153734

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: LOLA LIN, SECRETARY

03/29/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name BERGERET, FREDERIC
Address SUITE 100
259 N. RADNOR-CHESTER RD.
City-State-Zip: RADNOR PA 19087-5283

Title MANAGER
Name FIORANELLI, MARCELO
Address SUITE 100
259 N. RADNOR-CHESTER RD.
City-State-Zip: RADNOR PA 19087-5283

Title DIVISION VP/CFO - SOUTH
Name WORLEY, R. JAY
Address SUITE 100
259 N. RADNOR-CHESTER RD.
City-State-Zip: RADNOR PA 19087-5283

Title VICE PRESIDENT – TAX
Name COOK, JAMES E.
Address 259 N. RADNOR-CHESTER RD. SUITE
100
City-State-Zip: RADNOR PA 19087-5283

Title VICE PRESIDENT – CONTROLLER
Name SMYTH, THOMAS M
Address 259 N. RADNOR-CHESTER RD. SUITE
100
City-State-Zip: RADNOR PA 19087-5283

Title SECRETARY
Name DAILEY, MICHAEL
Address SUITE 100
259 N. RADNOR-CHESTER RD.
City-State-Zip: RADNOR PA 19087-5283

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: MICHAEL DAILEY

SECRETARY

03/29/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date