

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M17000005366

Entity Name: DE NORA TECH, LLC**Current Principal Place of Business:**7590 DISCOVERY LANE
CONCORD, OH 44077**Current Mailing Address:**7590 DISCOVERY LANE
CONCORD, OH 44077 US**FEI Number:** 34-1365932**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 MANAGER, PRESIDENT, DIRECTOR
Name TOMASELLI, FRANK
Address 7590 DISCOVERY LANE
City-State-Zip: CONCORD OH 44077

Title MEMBER
Name DE NORA HOLDINGS US, INC.
Address 7590 DISCOVERY LANE
City-State-Zip: CONCORD OH 44077

Title MANAGER
Name DELLACHA, PAOLO
Address INDUSTRIE DE NORA S.P.A., VIA
BISTOLFI, 35
City-State-Zip: MILAN 20134

Title MANAGER
Name FRANCIS, DAVID
Address 7590 DISCOVERY LANE
City-State-Zip: CONCORD OH 44077

Title MANAGER
Name GROSZEK, DONALD J
Address 7590 DISCOVERY LANE
City-State-Zip: CONCORD OH 44077

Title MGR
Name LODRINI, MATTEO
Address INDUSTRIE DE NORA S.P.A., VIA
BISTOLFI, 35
City-State-Zip: MILAN IT 20134

Title SECRETARY
Name SHELLEY, BRENT
Address 7590 DISCOVERY LANE
City-State-Zip: CONCORD OH 44077

Title TREASURER
Name FERRARI, ANGELO
Address INDUSTRIE DE NORA S.P.A., VIA
BISTOLFI, 35
City-State-Zip: MILAN IT 20134

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: BRENT SHELLEY**SECRETARY****01/21/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date