

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000002736

**Entity Name:** AIRGAS SPECIALTY PRODUCTS, INC.

**Current Principal Place of Business:**

2530 SEVER ROAD  
SUITE 300  
LAWRENCEVILLE, GA 30043

**Current Mailing Address:**

2530 SEVER ROAD  
SUITE 300  
LAWRENCEVILLE, GA 30043 US

**FEI Number:** 20-2529374

**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

**Officer/Director Detail :**

Title VP, DIRECTOR  
Name SMYTH, THOMAS M.  
Address 2530 SEVER ROAD  
SUITE 300  
City-State-Zip: LAWRENCEVILLE GA 30043

Title PRESIDENT, DIRECTOR  
Name WEHNER, MARTIN  
Address 2530 SEVER ROAD  
SUITE 300  
City-State-Zip: LAWRENCEVILLE GA 30043

Title SECRETARY  
Name YOUNG, ROBERT H. JR.  
Address 2530 SEVER ROAD  
SUITE 300  
City-State-Zip: LAWRENCEVILLE GA 30043

Title CFO  
Name TREPASSO, GRACE  
Address 2530 SEVER ROAD  
SUITE 300  
City-State-Zip: LAWRENCEVILLE GA 30043

Title DIRECTOR  
Name CICHOCKI, ANDREW R.  
Address 2530 SEVER ROAD  
SUITE 300  
City-State-Zip: LAWRENCEVILLE GA 30043

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** THOMAS M. SMYTH

**VICE PRESIDENT**

**04/11/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date