2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2019
Secretary of State
5165884040CC

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Entity Name: LANXESS SOLUTIONS US INC.

Current Principal Place of Business:

2 ARMSTRONG ROAD
SHELTON, CT 06484

Current Mailing Address:

2 ARMSTRONG ROAD
SHELTON, CT 06484 US

FEI Number: 52-2183153

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

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	PAPADOURAKIS, DR. ANTONIS
Address	111 RIDC PARK WEST DRIVE
City-State-Zip:	PITTSBURGH PA 15275

Title	SECRETARY
Name	SJOBERG, LEE
Address	111 RIDC PARK WEST DRIVE
City-State-Zip:	PITTSBURGH PA 15275

Title	DIRECTOR
Name	VAN ROESSEL, RAINIER
Address	KENNEDYPLATZ 1
City-State-Zip:	COLOGNE 50569

Title	ASST. SECRETARY
Name	VANHOORELBEKE, JACK
Address	111 RIDC PARK WEST DRIVE
City-State-Zip:	PITTSBURGH PA 15275

Title	CFO, DIRECTOR
Name	SCHOTT, FREDERIC
Address	111 RIDC PARK WEST DRIVE
City-State-Zip:	PITTSBURGH PA 15275

Title	ASST. SECRETARY
Name	FULLERTON, ARTHUR
Address	2 ARMSTRONG ROAD
City-State-Zip:	SHELTON CT 06484

Title	DIRECTOR
Name	PONTZEN, MICHAEL
Address	KENNEDYPLATZ 1
City-State-Zip:	COLOGNE, 50569

Title	ASST. SECRETARY
Name	BEHLMAN, JO ANN
Address	2 ARMSTRONG ROAD
City-State-Zip:	SHELTON CT 06484

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: LEE H. SJOBERG SECRETARY 02/15/2019

Electronic Signature of Signing Officer/Director Detail — Date