	State of Rhode Island and Providence Pl Office of the Secretary of State	
	-	
	Division Of Business Services	
	148 W. River Street Providence RI 02904-2615	
	(401) 222-3040	
HOPE	(+01) 222-30+0	
imited Liability C	ompany	
Annual Report		
Filing Period: Septembe	er 1 - November 1	
n accordance with R.I.	G.L. 7-16-66(d), each limited liability company failing or	refusing
	within thirty (30) days after the time prescribed by law (I	R.I.G.L. 7-
16-66(b&c)) is subject t	o a penalty fee of \$25.00.	
ANNUAL REPORT YE	AR: <u>2016</u>	
1. ID No. <u>000158</u>	3735	
2. Exact Name of the	e Limited Liability Company Owens Corning Sales,	, <u>LLC</u>
3. State of Formation	n	
State: DE		
	ARTICLE III	
	ARTICLE III	your business.
Using the following NA	NICS codes, please select the code that best describes	<u>6</u> <u>81</u>
Using the following NA		<u>6 81</u>
Using the following NA	NICS codes, please select the code that best describes	<u>6</u> <u>81</u>
Using the following NA NAICS Code 4. Brief Description o	NICS codes, please select the code that best describes	<u>6</u> <u>81</u>
Using the following NA NAICS Code 4. Brief Description of SALES AND SOUR	AICS codes, please select the code that best describes	<u>6</u> <u>81</u>
Using the following NA NAICS Code 4. Brief Description o SALES AND SOUR 5. Principal Office Ad	AICS codes, please select the code that best describes of the Character of the Business Which is Actually (ACING.	<u>6</u> <u>81</u>
Using the following NA NAICS Code 4. Brief Description of SALES AND SOUR 5. Principal Office Ad No. and Street: ONE	AICS codes, please select the code that best describes of the Character of the Business Which is Actually (ACING. Adress E OWENS CORNING PARKWAY	<u>6</u> <u>81</u> Conducted in Rhode Island
Using the following NA NAICS Code 4. Brief Description of SALES AND SOUR 5. Principal Office Ad No. and Street: ONE	AICS codes, please select the code that best describes of the Character of the Business Which is Actually (ACING. Adress E OWENS CORNING PARKWAY	<u>6</u> <u>81</u> Conducted in Rhode Island
Using the following NA NAICS Code 4. Brief Description o SALES AND SOUR 5. Principal Office Ad No. and Street: ONE City or Town: TOL	AICS codes, please select the code that best describes of the Character of the Business Which is Actually (ACING. Adress E OWENS CORNING PARKWAY	<u>6</u> <u>81</u> Conducted in Rhode Island Zip: <u>43659</u> Country: <u>USA</u>
Using the following NA NAICS Code 4. Brief Description of SALES AND SOUR 5. Principal Office Ad No. and Street: ONE City or Town: TOL 6. Mailing Address of	AICS codes, please select the code that best describes of the Character of the Business Which is Actually O ACING. Adress E OWENS CORNING PARKWAY LEDO State: OH f Limited Liability Company and Name or Title of C	<u>6</u> <u>81</u> Conducted in Rhode Island Zip: <u>43659</u> Country: <u>USA</u>
Using the following NA NAICS Code 4. Brief Description o SALES AND SOUR 5. Principal Office Ad No. and Street: ONE City or Town: TOL 6. Mailing Address or Contact Name: Cont	AICS codes, please select the code that best describes of the Character of the Business Which is Actually O ACING. Adress E OWENS CORNING PARKWAY JEDO State: OH f Limited Liability Company and Name or Title of C fact Title:	<u>6</u> <u>81</u> Conducted in Rhode Island Zip: <u>43659</u> Country: <u>USA</u>
Using the following NA NAICS Code 4. Brief Description of SALES AND SOUR 5. Principal Office Ad No. and Street: ONE City or Town: TOL 6. Mailing Address of Contact Name: Cont No. and Street: ONE	AICS codes, please select the code that best describes of the Character of the Business Which is Actually O ACING. Adress E OWENS CORNING PARKWAY LEDO State: OH f Limited Liability Company and Name or Title of C fract Title: OWENS CORNING PARKWAY	<u>6</u> <u>81</u> Conducted in Rhode Island Zip: <u>43659</u> Country: <u>USA</u> contact Person:
Using the following NA NAICS Code 4. Brief Description of SALES AND SOUR 5. Principal Office Ad No. and Street: ONE City or Town: TOL 6. Mailing Address of Contact Name: Cont No. and Street: ONE	AICS codes, please select the code that best describes of the Character of the Business Which is Actually O ACING. Adress E OWENS CORNING PARKWAY LEDO State: OH f Limited Liability Company and Name or Title of C fract Title: OWENS CORNING PARKWAY	<u>6</u> <u>81</u> Conducted in Rhode Island Zip: <u>43659</u> Country: <u>USA</u> contact Person:
Using the following NA NAICS Code 4. Brief Description o SALES AND SOUR 5. Principal Office Ad No. and Street: ONE City or Town: TOL 6. Mailing Address or Contact Name: Cont No. and Street: ONE City or Town: TOL	AICS codes, please select the code that best describes of the Character of the Business Which is Actually O ACING. ACING. Adress E OWENS CORNING PARKWAY LEDO State: OH f Limited Liability Company and Name or Title of C act Title: OWENS CORNING PARKWAY EDO State: OH s of Each Manager of the Limited Liability Company	6 81 Conducted in Rhode Island Zip: 43659 Contact Person: Zip: 43659 Contact Person:
Using the following NA NAICS Code 4. Brief Description of SALES AND SOUR 5. Principal Office Ad No. and Street: ONE City or Town: TOL 6. Mailing Address of Contact Name: Cont No. and Street: ONE City or Town: TOL 7. Name and Address	AICS codes, please select the code that best describes of the Character of the Business Which is Actually O ACING. ACING. Adress E OWENS CORNING PARKWAY LEDO State: OH f Limited Liability Company and Name or Title of C act Title: OWENS CORNING PARKWAY EDO State: OH s of Each Manager of the Limited Liability Company	6 81 Conducted in Rhode Island Zip: 43659 Country: USA contact Person: Zip: 43659 Country: USA

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02914</u>

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 26 Day of September, 2016 at 8:51:18 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>KELLY LETTMANN</u> Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$ 2007 - 2016 State of Rhode Island and Providence Plantations All Rights Reserved