



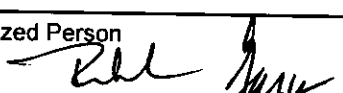
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP

Annual Report for the year: 2016

Limited Liability Company

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000911016		2. Exact name of the Limited Liability Company Koroseal Interior Products, LLC			
3. NAICS Code 31-33 - Manufacturing		4. Brief description of the character of business conducted in Rhode Island Sales solicitation			
5. State of Formation Delaware					
6. Principal Office Address 3875 Embassy Parkway, Suite 110		City Fairlawn		State OH	Zip 44333
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name James A. Schubert			Contact Title Tax Director		
Street Address 3875 Embassy Parkway, Suite 110		City Fairlawn		State OH	Zip 44333
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City		City		State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City		City		State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person Richard L. Garcia				Date 9/27/2016	
Signature of Authorized Person  SIGN DOCUMENT HERE					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED
OCT 03 2016
BY 125744 DS