S	tate of Rhode Island and Pro Office of the Secreta		S Fee: \$50.00
	Division Of Business		
	148 W. River S Providence RI 0290		
HOPE	(401) 222-30		
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR: 2017			
1. ID No. <u>001664808</u>			
2. Exact Name of the Limited Liability Company <u>Valvoline LLC</u>			
3. State of Formation			
State: <u>DE</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>324191</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted	in Rhode Island
OPERATING COMPANY FOR US VALVOLINE BUSINESS.			
5. Principal Office Addre	SS		
No. and Street: <u>1209</u>	ORANGE STREET		
City or Town: <u>WIL</u>	MINGTON State	: <u>DE</u> Zip: <u>19801</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>NICOLAS H SCHMELZER</u> Contact Title: <u>VICE PRESIDENT</u>			
	VALVOLINE WAY NGTON State:	<u>KY</u> Zip: <u>40509</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addre	SS
	First, Middle, Last, Suffix	Address, City or Town, Sta	te, Zip Code, Country
O. RESIDENT AGENT IN I	RHODE ISLAND - DO NOT ALTER		

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 6 Day of October, 2017 at 11:51:45 AM 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 NICOLAS H SCHMELZER

Signature of Authorized Person

Form No. 632 Revised 09/07

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