2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006935

Entity Name: ICL PERFORMANCE PRODUCTS INC.

Current Principal Place of Business:

1105 NORTH MARKET STREET SUITE 1300

WILMINGTON, DE 19801

Current Mailing Address:

1105 NORTH MARKET STREET SUITE 1300 WILMINGTON, DE 19801

FEI Number: 01-0847132 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

FILED Apr 27, 2017

Secretary of State

CC8155908043

Officer/Director Detail:

Title CEO, DIRECTOR Title SECRETARY

Name GLAZER, ELI Name REPASO, ANTHONY J

Address 622 EMERSON ROAD, SUITE 500 Address 622 EMERSON ROAD, SUITE 500

City-State-Zip: CREVE COEUR MO 63141 City-State-Zip: CREVE COEUR MO 63141

Title P Title TCFO, DIRECTOR

Name MOFFATT, JAMES R Name SCHLESSMAN, PAUL M

Address 622 EMERSON ROAD, SUITE 500 Address 622 EMERSON ROAD, SUITE 500

City-State-Zip: CREVE COEUR MO 63141 City-State-Zip: CREVE COEUR MO 63141

Title ASST. TREASURER Title VP, DIRECTOR
Name NAGEL, DEBORAH J Name COREY, NINA A

Address 622 EMERSON ROAD, SUITE 500 Address 1105 N MARKET ST SUITE 1300

City-State-Zip: CREVE COEUR MO 63141 City-State-Zip: WILMINGTON DE 19801

Title ASST. SECRETARY Title OFFICER

Name SAMPLE, ANNE M Name YOKOZUKA, NORIKO

Address 1105 NORTH MARKET STREET Address 622 EMERSON ROAD SUITE 500

SUITE 1300 SUITE 500

City-State-Zip: WILMINGTON DE 19801 City-State-Zip: CREVE COEUR MO 63141

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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: DEBORAH NAGEL

Electronic Signature of Signing Officer/Director Detail

ASSISTANT TREASURER

04/27/2017

Date

Officer/Director Detail Continued:

Title OFFICER

Name LUEDKE, WAYNE R
Address 622 EMERSON ROAD

SUITE 500

City-State-Zip: CREVE COEUR MO 63141