

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M2100000428

**Entity Name:** UNILEVER NORTH AMERICA SUPPLY CHAIN COMPANY, LLC

**Current Principal Place of Business:**

700 SYLVAN AVENUE  
ENGLEWOOD CLIFFS, NJ 07632

**Current Mailing Address:**

700 SYLVAN AVENUE  
ENGLEWOOD CLIFFS, NJ 07632 US

**FEI Number: 85-0632916**

**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

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           REGENHARD, MARY  
Address        700 SYLVAN AVE  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

Title           MANAGER  
Name           SCHWARTZ, DAVID A  
Address        700 SYLVAN AVE  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

Title           MANAGER  
Name           CAVALIERE, NATALIA  
Address        700 SYLVAN AVE  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

Title           MANAGER  
Name           O HARA, ERIN  
Address        700 SYLVAN AVE  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MARY REGENHARD**

**MANAGER**

**03/23/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date