DOC ID ----> 201419701398

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/17/2014	201419701398	FICTITIOUS NAME/ORIGINAL FILING (NFO)	50.00	100.00	0.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

EMERALD PERFORMANCE MATERIALS, LLC
BECKI WATSON
2020 FRONT STREET, SUITE 100
CUYAHOGA FALLS, OH 44221

STATE OF OHIO
CERTIFICATE

Ohio Secretary of State, Jon Husted
2311251

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

CVC THERMOSET SPECIALTIES

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
FICTITIOUS NAME/ORIGINAL FILING	**201419701398**

Effective Date: 07/16/2014

Expiration Date: 07/16/2019

EMERALD PERFORMANCE MATERIALS, LLC
2020 FRONT STREET
SUITE 100
CUYAHOGA FALLS, OH 44221

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 17th day of July, A.D. 2014.

Jon Husted

Ohio Secretary of State

DOC ID ----> 201419701398

Form 534A Prescribed by:
JON HUSTED
Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

Regular Filing (non expedite)
P.O. Box 670
Columbus, OH 43216

Expedite Filing **(Two-business day processing time requires an additional $100.00).**
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Columbus, OH 43216

2014 JUL 16 AM 11:38

Name Registration
Filing Fee: $50

CHECK ONLY ONE (1) Box

☐ Trade Name
(167-RNO)

Date of first use: _____
MM/DD/YYYY

☒ Fictitious Name
(169-NFO)

CVC Thermoset Specialties
Name being Registered or Reported

Emerald Performance Materials, LLC
Name of the Registrant

Note: If the registrant is a partnership, please provide the name of the partnership. Individual partner names are not permitted but are required on page 2 of the form.

Registrant's Entity Number (if registered with Ohio Secretary of State): 1621935

All registrants must complete the information in this section

The general nature of business conducted by the registrant:

Manufacturing and distributing chemicals

Business address:

2020 Front Street, Suite 100
Mailing Address

Cuyahoga Falls
City

OH
State

44221
Zip Code

DOC ID ----> 201419701398

Complete the information in this section if registrant is a partnership NOT registered in Ohio pursuant to ORC 1776, if partnership is registered, provide registration number on page one.

Provide the name and address of at least one general partner:

Name	Address

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign corporation/limited liability company, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation/limited liability company licensed in Ohio under an assumed name, please provide the assumed name and the name as registered in its jurisdiction of formation.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required
Application must be signed by the registrant or an authorized representative.

X Candace M Wagner 7/15/2014
Signature

By (if applicable)

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

Candace M. Wagner
Print Name

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.