

1.) CORPORATION NAME:

Knoll, Inc.

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1401456**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000,000
PREF	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1235 WATER ST

CITY/ST/ZIP: EAST GREENVILLE, PA 18041

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: LYNN M UTTER TITLE: P/COO ADDRESS: 1235 WATER STREET CITY/ST/ZIP/CO: EAST GREENVILLE, PA 18041</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL A POLLNER TITLE: VP/GC/Secretary ADDRESS: 1235 WATER STREET CITY/ST/ZIP/CO: EAST GREENVILLE, PA 18041</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: BARRY L MC CABE TITLE: EVP/CFO/T/C ADDRESS: 1235 WATER STREET CITY/ST/ZIP/CO: EAST GREENVILLE, PA 18041</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: ANDREW B COGAN TITLE: CEO ADDRESS: 76 NINTH AVE, 11TH FL. CITY/ST/ZIP/CO: NEW YORK, NY 10011</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: BURTON B STANIAR TITLE: CHM ADDRESS: 76 NINTH AVE 11TH FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10011</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Kathleen G. Bradley TITLE: DIRECTOR ADDRESS: 2146 California Road CITY/ST/ZIP/CO: Richklandtown, PA 18955</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jeffrey A. Harris DIRECTOR 400 W. 12th St. #9C New York, NY 10014	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Sidney Lapidus DIRECTOR 23 Delevan Lane Harrison, NY 10528	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	John F. Maypole DIRECTOR 14 Sherwood Drive Mountain Lakes, NJ 07046	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Stephen F. Fisher DIRECTOR 210 Hares Lane Radnor, PA 19087	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Sarah E. Nash DIRECTOR 898 Park Ave. New York, NY 10075	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jeffrey Blom SVP 1235 Water Street East Greenville, PA 18041	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	John C. Finken SVP 1235 Water Street East Greenville, PA 18041	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Benjamin A. Pardo EVP 76 Ninth Ave., 11th Floor New York, NY 10011	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	John Wilson ASST SECRETARY 1235 Water Street East Greenville, PA 18041	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	David Schutte SVP 76 Ninth Ave., 11th Floor New York, NY 10011	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	David Bright SVP 76 Ninth Ave., 11th Floor New York, NY 10011	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	Michael Springer	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP		
ADDRESS:	1235 Water Street		
CITY/ST/ZIP/CO:	East Greenville, PA 18041		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ MICHAEL A POLLNER</u>	<u>MICHAEL A POLLNER,</u>	<u>10/1/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	VP/GC/Secretary PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.