

Please complete in typescript, or in bold black capitals. CHFP041

88(2) Return of Allotment of Shares

Company	Number
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_		_	
Company	name	in	full

4215941	
Ineos Investment Holdings Limited	

Shares allotted (including bonus shares):

Date or period during which shares were allotted (if shares were allotted on one date enter that date in the "from" box.)

Class of shares (ordinary or preference etc.)

Number allotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

From	То
Day Month Year	Day Month Year
2 2 0 5 2 0 0 1	

Ordinary		
11,500,130		 · · · ———
£1		
£1		

List the names and addresses of the allottees and the number of shares allotted to each overleaf

If the allotted shares are fully or partly paid up otherwise than in cash please state:

% that each share is to be treated as paid up

Consideration for which the shares were allotted

(This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)

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1. 11,499,950 shares of Ineos Oxide Ltd

2. 1,200,000 shares of Ineos Investment Holdings (Fluor & Silicas) Ltd

3. 600,000 shares of Ineos Phenol Ltd

When you have completed and signed the form send it to the Registrar of Companies at:

LD7 **LRLPU1UC** 0134

Form Revised January 2000

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 for companies registered in Scotland Edinburgh

Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details		Shares and share	Shares and share class allotted	
Name		Class of shares allotted	Number allotted	
Ineos Group Limited		dilottod	anotica	
Address				
1st Floor, Queen's Gate, Southampton,	Hampshire	<u> Ordinary</u>	11,500,130	
UK Pos	stcode SO143BP		- L	
Name I		Class of shares allotted	Number allotted	
Address				
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Name		Class of shares allotted	Number allotted	
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Please enter the number of continu	uation sheet(s) (if any) attached to t	his form		
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Signed A director / sec etary / administrator / administrator	Date	Please delete as a		
Please give the name, address,	FRESHFIELDS BRUCKHAUS DERI	NGER		
telephone number and, if available, a DX number and Exchange of the	65 FLEET STREET, LONDON, ENG		GDOM	
person Companies House should contact if there is any query.		020 7936 4000		
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