

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000005070

Entity Name: O-I PACKAGING SOLUTIONS LLC

Current Principal Place of Business:

5200 TENNYSON PKWY, STE 100
PLANO, TX 75024

Current Mailing Address:

ONE MICHAEL OWENS WAY
ATTN: TAX - P1
PERRYSBURG, OH 43551-2999 US

FEI Number: 47-1908658

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC
515 EAST PARK AVENUE
2ND FL
TALLAHASSEE, FL 32301 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: CAPITOL CORPORATE SERVICES

04/10/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name HAUDRICH, JOHN A
Address ONE MICHAEL OWENS WAY
City-State-Zip: PERRYSBURG OH 43551

Title ASSISTANT SECRETARY
Name REYNOLDS III., JOHN W.
Address ONE MICHAEL OWENS WAY
City-State-Zip: PERRYSBURG OH 43551

Title SECRETARY
Name ABRAHAMS , DARROW A.
Address ONE MICHAEL OWENS WAY
City-State-Zip: PERRYSBURG OH 43551

Title ASST. TREASURER
Name GEDRIS , SCOTT
Address ONE MICHAEL OWENS WAY
City-State-Zip: PERRYSBURG OH 43551

Title VP
Name BURNS , RANDOLPH L.
Address ONE MICHAEL OWENS WAY
City-State-Zip: PERRYSBURG OH 43551

Title ASST. TREASURER
Name THIE, CHRISTOPHER
Address ONE MICHAEL OWENS WAY
City-State-Zip: PERRYSBURG OH 43551

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: CHRISTOPHER THIE

ASSISTANT TREASURER 04/10/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date