

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003104

Entity Name: NOVELIS CORPORATION**Current Principal Place of Business:**3560 LENOX RD.
SUITE 2000
ATLANTA, GA 30326**Current Mailing Address:**3560 LENOX RD.
SUITE 2000
ATLANTA, GA 30326**FEI Number:** 41-2098321**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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**Officer/Director Detail :**

Title PRESIDENT, DIRECTOR
Name PALMIERI , MARCO
Address 3560 LENOX ROAD
 SUITE 2000
City-State-Zip: ATLANTA GA 30326

Title VP, DIRECTOR, TREASURER
Name KEDDY, DEREK
Address 3560 LENOX ROAD
 SUITE 2000
City-State-Zip: ATLANTA GA 30326

Title VP, SECRETARY, DIRECTOR,
 OFFICER, GENERAL COUNSEL
Name PARRETTE, JR., LESLIE J.
Address 3560 LENOX ROAD
 SUITE 2000
City-State-Zip: ATLANTA GA 30326

Title ASST. TREASURER, OFFICER
Name RAULS, STEPHANIE
Address 3560 LENOX ROAD
 SUITE 2000
City-State-Zip: ATLANTA GA 30326

Title ASST. SECRETARY, OFFICER
Name TILLMAN, JOHN
Address 3560 LENOX ROAD
 SUITE 2000
City-State-Zip: ATLANTA GA 30326

Title ASST. SECRETARY, OFFICER
Name ROBINSON, NICHOLE
Address 3560 LENOX ROAD
 SUITE 2000
City-State-Zip: ATLANTA GA 30326

Title ASST. TREASURER, OFFICER
Name MILLER, RANDY
Address 3560 LENOX RD.
 SUITE 2000
City-State-Zip: ATLANTA GA 30326

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NICHOLE ROBINSON**ASST. SECRETARY****04/12/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date