PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 JUL -3 AM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # 844938

1. Corporation Name
Rexam Beverage Can Company

2. Principal Office Address	**3.** Mailing Office Address
4201 Congress Street	
Suite, Apt. #, etc.: Suite 340	Suite, Apt. #, etc.
City & State: Charlotte	City & State
Zip: NC / Country: USA	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 36-2241181 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: NRAI Services, Inc.
Street Address (P.O. Box Number is Not Acceptable): 526 E. Park Avenue
Suite, Apt. #, Etc.:
City: Tallahassee | State: FL | Zip Code: 32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: NRAI Services, Inc. Charles Coyle
Charles Coyle REGISTERED AGENT MUST SIGN Asst. Secy
Date: 7-2-2002

CR2E081 (9/01)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	William Barker	8770 W. Bryn Mawr	Chicago, IL 60631
Director VP	Frank Brown	4201 Congress St, Suite 340	Charlotte, NC 28209
Director VP	Ronald H. Glasshoff	4201 Congress St, Suite 340	Charlotte, NC 28209
Treasurer	Clinton H. Tumlin	4201 Congress St, Suite 340	Charlotte, NC 28209
AssSec	Peggy Harrington	4201 Congress St, Suite 340	Charlotte, NC 28209

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Ronald H Glasshoff
Ronald H Glasshoff
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 1, 2002 (Date) 704/551-1500 (Daytime Phone #)