

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001675

Entity Name: ARDAGH GLASS INC.**Current Principal Place of Business:**10194 CROSSPOINT BLVD
SUITE 410
INDIANAPOLIS, IN 46256**Current Mailing Address:**PO BOX 50487
INDIANAPOLIS, IN 46250 US**FEI Number:** 35-1958205**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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/CEO
Name PAULET, BERTRAND
Address 10194 CROSSPOINT BLVD
 SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256

Title SECRETARY
Name MARKUS, JOSHUA
Address 10194 CROSSPOINT BLVD
 SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256

Title CHIEF COMMERCIAL OFFICER
Name ROBERTSON, ALEX
Address 10194 CROSSPOINT BLVD
 SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256

Title ASST. SECRETARY
Name CLAY HALL, CAROLYN
Address 10194 CROSSPOINT BLVD
 SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256

Title TREASURER
Name HOLZ, THOMAS
Address 10194 CROSSPOINT BLVD
 SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256

Title COO
Name LEAHY, MICK
Address 10194 CROSSPOINT BLVD
 SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256

Title ASST. SECRETARY
Name SIBBITT, JASON TY
Address 10194 CROSSPOINT BLVD
 SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256

Title ASST. TREASURER
Name MAGUIRE, CORMAC
Address 10194 CROSSPOINT BLVD
 SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256

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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: CAROLYN CLAY HALL**ASSISTANT SECRETARY 04/24/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT SECRETARY
Name SCHNURR, MARY
Address 10194 CROSSPOINT BLVD
SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256

Title DIRECTOR
Name MATTHEWS, DAVID
Address 10194 CROSSPOINT BLVD
SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256

Title DIRECTOR
Name WARNER, JAMES
Address 10194 CROSSPOINT BLVD
SUITE 410
City-State-Zip: INDIANAPOLIS IN 46256