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### COVER LETTER

TO: Amendment Section Division of Corporati	ons				
SUBJECT: Chesapeake Cont	ainment Systems, In				
	Name o	f Corpora	tion		
DOCUMENT NUMBER:_	F08000002354				
The enclosed Amendment ar	id fee are submit	ted for fi	ling.		
Please return all corresponde	nce concerning t	his matte	er to the followi	ng:	
Lisa M. Valdez, Esq.					
Name of Co	ntact Person		<del></del>		
Law Firm of Pope, McMillan					
Firm/C	Company				
PO Drawer 1776					
Ado	Iress				
Statesville, NC 28687					
City/State	and Zip Code		<del></del>		
jmcgraw@ccsliners.com					
E-mail address: (to be use	d for future annua	l report n	otification)		
For further information conc	erning this matte	r. please	call:		
Lisa M. Valdez		704 at (	873-2131		
Name of Contact Per	son	Area	Code & Daytime	Telepho	one Number
Enclosed is a check for the fo	ollowing amount	:			
\$35.00 Filing Fee	\$43.75 Filing Fee & Certificate of Status		\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)		\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

## SECTION I (1-3 MUST BE COMPLETED)

F08000002354		
(Document num	nber of corporation (if known)	
Chesapeake Containment Systems, Inc.		
(Name of corporation as it appe	ears on the records of the Department of State	:)
2. Maryland	3. 5/23/2008 (Date authorized to do b	
(Incorporated under laws of)	(Date authorized to do b	usiness in Florida)
(4-7 COMPLETE ON	SECTION II LY THE APPLICABLE CHANGES)	
4. If the amendment changes the name of the corpor	ation, when was the change effected t	inder the laws of
its jurisdiction of incorporation?		
5. <sup>n/a</sup>		
(Name of corporation after the amendment, addin appropriate abbreviation, if not contained in new n/a	v name of the corporation)	
(If new name is unavailable in Florida, enter alterr business in Florida)	nate corporate name adopted for the pi	2000年50
5. If the amendment changes the period of duration,	indicate new period of duration.	\$ 55 \$ 55
perpetual	(New duration)	
	•	
7. If the amendment changes the jurisdiction of inco	rporation, indicate new jurisdiction.	
North Carolina	New jurisdiction)	
3. Attached is a certificate or document of similar in 90 days prior to delivery of the application to the having custody of corporate records in the jurisdic	aport evidencing the amendment aut	henticated not more than of State or other official orporated.
(Signature of a director.	president or other officer - if in the hands	
of a receiver or other co Ryan C. Kamp	urt appointed fiduciary, by that fiduciary)  President	
(Typed or printed name of person signing)	(Title of person si	gning)



# NORTH CAROLINA Department of the Secretary of State

#### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### CHESAPEAKE CONTAINMENT SYSTEMS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 2nd day of January, 2018, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 26th day of March, 2018.

Elaine J. Marshall

Secretary of State



# NORTH CAROLINA Department of the Secretary of State

### To all whom these presents shall come, Greetings:

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

### ARTICLES OF INCORPORATION

**OF** 

### CHESAPEAKE CONTAINMENT SYSTEMS, INC.

the original of which was filed in this office on the 2nd day of January, 2018.





IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 2nd day of January, 2018.

Elaine I Marshall

Secretary of State

### State of North Carolina Department of the Secretary of State

SOSID: 1649415
Date Filed: 1/2/2018 12:55:00 PM
Elaine F. Marshall
North Carolina Secretary of State
C2017 356 00994

#### ARTICLES OF INCORPORATION

Pursuant to §55-2-02 of the General Statutes of North Carolina, the undersigned does hereby submit these Articles of Incorporation for the purpose of forming a business corporation.

1.	1. The name of the corporation is: Chesapeake	: Conta	inment Systems, Inc	
2.				
3.				
	a. All of one class, designated as commo	n stock;	or	
	b. Divided into classes or series within a with the information required by N.C.6			chedule,
4.	The name of the initial registered agent is:	n Kan	ıp	
5.	The North Carolina street address and county of Number and Street 2690-D Salisbury Hw		l registered office of the c	orporation is:
	City Statesville State	NC	Zip Code 28677	County Iredell
5.	. The mailing address, if different from the street  Number and Street	address,	of the initial registered of	ffice is:
	CityState	NÇ _	Zip Code	County
	Principal office information: (must select either	a or b.)		
	a. The corporation has a principal office	<b>:</b> .		
	The principal office telephone number: (704) 2	208-34	140	
	The street address and county of the principal off	ice of th	e corporation is:	
	Number and Street 2690-D Salisbury Hwy	<b>/</b>		
	City Statesville State	NC	Zip Code 28677	County Iredell
	The mailing address, if different from the street of	ıddress,	of the principal office of t	he corporation is:
	Number and Street		, -	
	CityState_			County
			<u> </u>	<del></del>

The name and address of	each incorporator is as follows:	
Name Lisa M, Vaidez	Address 113 N. Center Street, Suite 200,	Statesville, NC 28677
(Optional): Listing of Co	mpany Officers (See instructions on when	ny this is important)
Name	Address	Title
The Secretary of State's O document is filed. The e-r.	a business e-mail addre ffice will e-mail the business automational nail provided will not be viewable on t	cally at the address provided at no charge whe he website. For more information on why this
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NOTES:

1. Filing fee is \$125. This document must be filed with the Secretary of State.