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COVER LETTER

TO: Registration Section Division of Corporations				
Concept Management Corp	oration			
SUBJECT: Name	of corporation	- must include suffix	 	
Dear Sir or Madam:				
The enclosed "Application by Foreign C "Certificate of Existence," or "Certifica above referenced foreign corporation to	te of Good Stan	ding" and check are submi	Business in Florida," tted to register the	
Please return all correspondence concer Jack Waters	ning this matter	to the following:		
	Name of	Person		
Concept Packaging Group				
	Firm/Com	pany		
60 Fairview Church Road				
	Addre	ess		
Spartanburg, SC 29303				
	City/State a	nd Zip code		
jackw@concept-pkg.com				
E-mail addre	ss: (to be used f	or future annual report not	ification)	
For further information concerning this	matter, please o	all:		
Jack Waters	864 at (253-4063	253-4063	
Name of Person	Area Cod	Daytime Telephor	ne Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registration Sect Division of Corp P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following an	nount:			
□ \$70.00 Filing Fee ■ \$78.75 Fil Certificate	ing Fee & C	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	f corporation; must include "INCORPORATED, "Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"
Concept Mana	agement Corporation of South Carolina	
(If name unava	ilable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
South Carolin 2.	a 3.	57-0978168
(State or coun June 18, 1993	atry under the law of which it is incorporated) 5.	(FEI number, if applicable)
4(Da	te of incorporation)	(Date of duration, if other than perpetual)
60 Fairview Ch	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 urch Road, Spartanburg, SC 29303	Florida, if prior to registration) 502, F.S., to determine penalty liability)
same	(Princip	al office address)
8. Name and streen Name: Office Address:	Current mains eet address of Florida registered agent: (P.C Corporation Service Company 1201 Hayes Street	in Florida, if prior to registration) 502, F.S., to determine penalty liability) and office address) or Crack or
Office Address.	Tallahassee	32301 , Florida
	(City)	(Zip code)
Having been nan designated in thi further agree to	s application, I hereby accept the appointn comply with the provisions of all statutes r familiar with and accept the obligations of	ce of process for the above stated corporation at the place ment as registered agent and agree to act in this capacity. I elative to the proper and complete performance of my f my position as registered agent. Process Sistant Vice President
_	(Registered a	gent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: ___ Vice Chairman: ______ Address: _____ Director: __ B. OFFICERS David Katt President: 60 Fairview Church Road Address: Spartanburg, SC 29303 Larry Cantrell Vice President: 60 Fairview Church Road Address: Spartanburg, SC 29303 Larry Cantrell Secretary: 60 Fairview Church Road Spartanburg, SC 29303 Address: _ Dale Katt Treasurer: 60 Fairview Church Road Spartanburg, SC 29303 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. PRESIDENT David Katt 13.

(Typed or printed name and capacity of person signing application)

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

CONCEPT MANAGEMENT CORPORATION,

a corporation duly organized under the laws of the State of South Carolina on June 18th, 1993, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 17th day of July, 2017.

Mark Hammond, Secretary of State