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TO: Registration Section Division of Corporations	,	**	st.		
SUBJECT: Coval Vacuum Technolo	ogy Inc.				
Na	me of corporation -	must include suffix			
Dear Sir or Madam:					
The enclosed "Application by Foreig "Certificate of Existence," or "Certificate of eign corporation	cate of Good Stand	ing" and check are sub-	et Business in Florida," mitted to register the		
Please return all correspondence cond	erning this matter t	o the following:			
Mike Bullard	· ·	J			
	Name of Po	Pron			
Coval Vacuum Technology Inc.	Trume of 1	013011			
	Firm/Comp	any			
901 Jones Franklin Rd. Suite 100					
	Addres	s			
Raleigh, NC 27606					
	City/State and	l Zip code	· · · · · · · · · · · · · · · · · · ·		
mike.bullard@coval.com	-	•			
E-mail add	iress: (to be used fo	r future annual report n	otification)		
	•	•	,		
For further information concerning th	is matter, please cal	ll:			
Mike Bullard	.919	. 867-5014			
· · · · · · · · · · · · · · · · · · ·	at ()			
Name of Person	Area Code	Daytime Teleph	none Number		
STREET/COURIER ADDI	erec.	MAILING A	nnpfss.		
Registration Section			Registration Section		
Division of Corporations			Division of Corporations		
The Centre of Tallahassee			P.O. Box 6327		
2415 N. Monroe Street, Suite Tallahassee, FL 32303	810	Tallahassee, F	L 32314		
Enclosed is a check for the following	amount:				
Please make check payable to: FLORID	A DEPARTMENT O				
	•	\$78.75 Filing Fee &	□ \$87.50 Filing Fee,		
Certific	ate of Status	Certified Copy	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.

<u>.</u> .					
If name unavail	able in Florida, enter alternate corporate name				
Delaware	3.	26-0437512	(FEI number, if applicable)		
(State or country	3. ry under the law of which it is incorporated)	(FEI number, if a	pplicable)		
06/26/2007					
(Date	e of incorporation)	(Date of duration, if other	r than perpe	etual)	
10/01/2019					
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liabi	lity)		
01 Jones Frankl	in Rd. Suite 100 Raleigh, NC 27606				
		icc street address)		<u>.</u>	
	(Current maili	ng address, if different)			
Name and stre	et address of Florida registered agent: (P.o.	O. Box NOT acceptable)			
	Corporation Service Colmpany		•	.: O	
Name	• •				
Name:			!,	1:	
Name:	1201 Hays Street	·	· ,	/ 	
	1201 Hays Street	Florida 32301	·.	() 11 12 13	
	1201 Hays Street	, Florida 32301 (Zip code)		73 20 W	
īce Address:	1201 Hays Street Talahassee	, Florida 32301 (Zip code)		<u>.</u>	

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

A. DIRECTORS Joseph Reams Jr. Michael Bullard Name: □ Chairman □ Chairman 901 Jones Franklin Rd. 901 Jones Franklin Rd. Address: ☐ Vice Chairman ☐ Vice Chairman Address: Suite 100 Suite 100 Director □ Director Raleigh, NC 27606 Raleigh, NC 27606 ■ President President ☐ Vice President ☐ Vice President ☐ Secretary □Treasurer ■ Secretary Treasurer Other Other ____ Other ____ □Other Name: □ Chairman ☐ Chairman Name: ☐Vice Chairman Address: □Vice Chairman Address: Director □ Director President □ President ☐ Vice President ☐ Vice President ☐ Secretary ☐ Treasurer ☐ Secretary Treasurer Other ____ Other____ Other _____ Other _____ □ Chairman ☐ Chairman Name: Address: ☐ Vice Chairman □Vice Chairman Address: Director □ Director □President □President □Vice President ☐ Vice President □ Secretary □Treasurer ☐ Secretary □ Treasurer □Other Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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. Michael G. Bullard Secretary/Treasurer



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "COVAL VACUUM TECHNOLOGY INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF DECEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COVAL VACUUM TECHNOLOGY INC." WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF JUNE,

A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Authentication: 204223620

Date: 12-03-20