

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

P101  
1432254.09  
Michael G. Adams  
Secretary of State  
Received and Filed  
2/24/2025 12:00:00 AM  
Fee receipt: \$90

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

1. The entity is a **profit corporation**.

2. The name of the entity is

**CIMC PALLET USA CORP**

3. The name of the entity to be used in Kentucky is

**CIMC PALLET USA Corp**

4. The state or country under whose law the entity is organized is **Texas**.

5. The date of organization is **6/16/2022** and the period of duration is **perpetual**.

6. The mailing address of the entity's principal office is

**1501 S Mopac Expy Ste 220, Austin, TX 78746**

7. The name of the initial registered agent is

**CAPITOL CORPORATE SERVICES, INC.**

and the street address of the entity's initial registered office in Kentucky is

**828 Lane Allen Rd Ste 219, Lexington, KY 40504**

8. The names and business addresses of the entity's representatives:

**Registered Agent** CAPITOL CORPORATE SERVICES, INC. 828 Lane Allen Rd Ste 219, Lexington, KY 40504

**General Manager** David Hampton 1501 S Mopac Expy Ste 220, Austin, TX 78746

**Authorized Rep** David Hampton 1501 S Mopac Expy Ste 220, Austin, TX 78746

**Director** SONG HUANG BLDG 4, A801 BLUE MOON BAY, SHEN ZHEN, 518065

9. This filing will be effective on **Monday, February 24, 2025**.

This entity is **NOT** a tobacco retailer as defined by KRS 438.305(9).

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of individual signing on behalf of A  
**David Hampton**

**1432254.09**  
**Michael G. Adams**  
**Secretary of State**  
Received and Filed

P101

**2/24/2025 12:00:00 AM**  
**Fee receipt: \$90**

I, **Amanda Contreras**, consent to sign for C,  
**CORPORATE SERVICES, INC.** who serve  
Agent on behalf of this entity on Monday, February 24, 2025.

