

1.) CORPORATION NAME: ASSOCIATED WHEELS, INC.	DUE DATE: 12/31/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: MARTHA D MURRAY 1954 SKYWAY DR MONETA, VA	SCC ID NO: 00854661				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: BEDFORD COUNTY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1954 SKYWAY DRIVE

CITY/ST/ZIP: MONETA, VA 24121

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: KEVIN D MURRAY TITLE: PRESIDENT ADDRESS: 1954 SKYWAY DRIVE CITY/ST/ZIP/CO: MONETA, VA 24121	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MARTHA D MURRAY TITLE: VP/T ADDRESS: 1954 SKYWAY DRIVE CITY/ST/ZIP/CO: MONETA, VA 24121	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MARSHALL J. MURRAY TITLE: DIRECTOR ADDRESS: 600 RUSSELL SPRINGS ROAD CITY/ST/ZIP/CO: LYNCHBURG, VA 24501	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MARTHA D MURRAY	MARTHA D MURRAY, VP/T	12/6/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.