

1.) CORPORATION NAME: KANAL, INC.	DUE DATE: 3/31/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ALISON BROOKS COOK 20260 GILESWOOD FARM LN PURCELLVILLE, VA	SCC ID NO: 02847275				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: LOUDOUN 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>COMA</td> <td>51,000</td> </tr> </table>	CLASS	AUTHORIZED	COMA	51,000
CLASS	AUTHORIZED				
COMA	51,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 20260 GILESWOOD FARM LN CITY/ST/ZIP: PURCELLVILLE, VA 20132	
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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: Alison Brooks Cook TITLE: PRESIDENT ADDRESS: 20260 Gileswood Farm Court CITY/ST/ZIP/CO: Purcellville, VA 20132	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: Christopher Hale Cook TITLE: SECRETARY ADDRESS: 17302 Simmons Road CITY/ST/ZIP/CO: Purcellville, VA 20132	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: Glenn William Cook TITLE: ASST SECRETARY ADDRESS: 4111 San Marco Drive CITY/ST/ZIP/CO: Glen Allen, VA 23060	<input checked="" 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/ Alison BrooksCook	Alison BrooksCook,	12/30/2013
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.