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| 1.) CORPORATION NAME: C & D Construction Corporation 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ONZLEE WARE 305 First Street, Suite 418 P. O. Box 1745 Roanoke, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ROANOKE CITY 4.) STATE OR COUNTRY OF INCORPORATION: VA | DUE DATE: 12/31/2015 SCC ID NO: 03859030 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 |
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| 6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: P.O. BOX 4666 CITY/ST/ZIP: MARTINSVILLE, VA 24115 | |
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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.

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| NAME: MICHAEL SCALES TITLE: PRES/TREAS ADDRESS: PO BOX 2001 CITY/ST/ZIP/CO: MARTINSVILLE, VA 24113 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
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| NAME: AMERICA L SCALES TITLE: SECRETARY ADDRESS: PO BOX 2001 CITY/ST/ZIP/CO: MARTINSVILLE, VA 24113 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
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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.

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| /s/ MICHAEL SCALES | MICHAEL SCALES, PRES/TREAS | 12/30/2015 |
| 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.