

1.) CORPORATION NAME:

**Total Distribution Services, Inc.**

DUE DATE: **4/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATE CREATIONS NETWORK INC.  
4445 CORPORATION LANE, 2ND FLOOR  
VIRGINIA BEACH, VA 23462**

SCC ID NO: **03915329**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 1,000      |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**VIRGINIA BEACH CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 301 W BAY STREET

CITY/ST/ZIP: JACKSONVILLE, FL 32202

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.

|                 |   |                                   |
|-----------------|---|-----------------------------------|
|                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME:           | G J CUMMING JR                              |                                   |
| TITLE:          | PRESIDENT                                   |                                   |
| ADDRESS:        | 301 W BAY STREET                            |                                   |
| CITY/ST/ZIP/CO: | JACKSONVILLE, FL 32202                      |                                   |

|                 |   |                                   |
|-----------------|---|-----------------------------------|
|                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME:           | FREDRIK J ELIASSON                          |                                   |
| TITLE:          | VICE PRESIDENT                              |                                   |
| ADDRESS:        | 500 WATER STREET                            |                                   |
| CITY/ST/ZIP/CO: | JACKSONVILLE, FL 32202                      |                                   |

|                 |   |                                   |
|-----------------|---|-----------------------------------|
|                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME:           | MARK D AUSTIN                               |                                   |
| TITLE:          | CORP SEC                                    |                                   |
| ADDRESS:        | 500 WATER ST                                |                                   |
| CITY/ST/ZIP/CO: | JACKWSONVILLLE, FL 32202                    |                                   |

|                 |                                  |  |
|-----------------|----------------------------------|--|
|                 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:           | NATHAN GOLDMAN                   |  |
| TITLE:          | DIRECTOR                         |  |
| ADDRESS:        | 500 WATER STREET                 |  |
| CITY/ST/ZIP/CO: | JACKSONVILLE, FL 32202           |  |

|                 |                                  |  |
|-----------------|----------------------------------|--|
|                 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:           | CLARENCE GOODEN                  |  |
| TITLE:          | DIRECTOR                         |  |
| ADDRESS:        | 500 WATER ST                     |  |
| CITY/ST/ZIP/CO: | JACKSONVILLE, FL 32202           |  |

|                 |                                  |  |
|-----------------|----------------------------------|--|
|                 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:           | ANDREW J STROK                   |  |
| TITLE:          | DIRECTOR                         |  |
| ADDRESS:        | 301 W BAY ST                     |  |
| CITY/ST/ZIP/CO: | JACKSONVILLE, FL 32202           |  |

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/ MARK D AUSTIN  | MARK D AUSTIN, CORP SEC          | 4/23/2012 |
| 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. |                                  |           |