

1.) CORPORATION NAME: ASSOCIATED INSURANCE SYSTEMS SERVICES, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CRYSTAL MILLER JOHNSON 3108 N PARHAM RD STE 302B RICHMOND, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: VA	DUE DATE: 6/30/2014 SCC ID NO: 03937059 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>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED				
COMMON	5,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3108 NORTH PARHAM RD STE 302B

CITY/ST/ZIP: RICHMOND, VA 23294

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: CRYSTAL MILLER JOHNSON TITLE: PRESIDENT ADDRESS: 3108 N PARHAM RD STE 302B CITY/ST/ZIP/CO: RICHMOND, VA 23294	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: RICHARD DAVIS TITLE: TREASURER ADDRESS: 3821 BARRINGTON BRANCH CT CITY/ST/ZIP/CO: RICHMOND, VA 23233	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: ALVIN HUNTER TITLE: SECRETARY ADDRESS: 1627 HUNGARY ROAD CITY/ST/ZIP/CO: RICHMOND, VA 23228	<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.

/s/ CRYSTAL MILLER JOHNSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CRYSTAL MILLER JOHNSON, PRESIDENT PRINTED NAME AND CORPORATE TITLE	7/27/2014 DATE
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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.