

1.) CORPORATION NAME: FOUR SEASONS OF MCLEAN, LTD. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: STEVEN M. COOLEY 1715 Birch Road McLean, VA	DUE DATE: 2/28/2015 SCC ID NO: 04056412 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				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY					
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 1715 BIRCH RD CITY/ST/ZIP: MCLEAN, VA 22101
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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: STEVEN M COOLEY TITLE: PRESIDENT ADDRESS: 1715 BIRCH ROAD CITY/ST/ZIP/CO: MCLEAN, VA 22101	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: LYNN M COOLEY TITLE: VICE PRESIDENT ADDRESS: 1715 BIRCH ROAD CITY/ST/ZIP/CO: MCLEAN, VA 22101-4730	<input checked="" type="checkbox"/> OFFICER <input 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/ LYNN M COOLEY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	LYNN M COOLEY, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	1/8/2015 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.