

<p>1.) CORPORATION NAME: CLS MANAGEMENT SERVICES, INCORPORATED</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: RYAN & WETMORE, P.C. 1950 OLD GALLOWS ROAD SUITE 525 VIENNA, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p>	<p>DUE DATE: 10/31/2013</p> <p>SCC ID NO: 04359048</p> <p>5.) STOCK INFORMATION</p> <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>10</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	10
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6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8124 OAKLAKE CT

CITY/ST/ZIP: ALEXANDRIA, VA 22309

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.

<p>NAME: CYNTHIA L SHIFFLETT</p> <p>TITLE: PRESIDENT</p> <p>ADDRESS: P O BOX 154</p> <p>CITY/ST/ZIP/CO: MOUNT VERNON, VA 22121</p>	<p style="text-align: center;"><input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR</p>
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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/ CYNTHIA L SHIFFLETT	CYNTHIA L SHIFFLETT, PRESIDENT	10/29/2013
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.