

1.) CORPORATION NAME:

**ARMAND'S RESTAURANT MANAGEMENT, INC.**

DUE DATE: **6/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CALVIN EVERETT  
SUITE B  
47569 HIDDEN COVE COURT  
  
STERLING, VA 20165**

SCC ID NO: **04681821**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**LOUDOUN COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 47569 HIDDEN COVE CT STE B  
CITY/ST/ZIP: POTOMAC FALLS, VA 20165

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 checked="" type="checkbox"/> DIRECTOR
NAME:	STEVE LEWIS NEWMYER	
TITLE:	PRESIDENT	
ADDRESS:	1491 DUNSTER LANE	
CITY/ST/ZIP/CO:	POTOMAC, MD 20854	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RONALD NEWMYER	
TITLE:	VICE PRESIDENT	
ADDRESS:	2229 LUZERNE AVE	
CITY/ST/ZIP/CO:	SILVER SPRING, MD 20910	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CALVIN EVERETT	
TITLE:	CFO	
ADDRESS:	47569 HIDDEN COVE CT	
CITY/ST/ZIP/CO:	POTOMAC FALLS, VA 20165	

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.

<u>/s/ STEVE LEWIS NEWMYER</u>	<u>STEVE LEWIS NEWMYER,</u>	<u>8/7/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.