

1.) CORPORATION NAME: PUBLIC PRIVATE SOLUTIONS GROUP, INC.	DUE DATE: 11/30/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: WILLIAM A MARR JR 3861 PLAZA DR FAIRFAX, VA	SCC ID NO: 05114376				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX CITY (FILED IN FAIRFAX COUNTY)	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				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2151 JAMIESON AVE SUITE 1809

CITY/ST/ZIP: ALEXANDRIA, VA 22314

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: WILLIAM T HARVEY			
TITLE: PRESIDENT			
ADDRESS: 2151 JAMIESON AVE			
CITY/ST/ZIP/CO: SUITE 1809 ALEXANDRIA, VA 22314			

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: JOHN C MURPHY			
TITLE: DIRECTOR			
ADDRESS: 11508 ARMOUR CT			
CITY/ST/ZIP/CO: GOLD RIVER, CA 95670			

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/ WILLIAM T HARVEY	WILLIAM T HARVEY, PRESIDENT	9/25/2014
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.