

1.) CORPORATION NAME: CDK Incorporated	DUE DATE: 2/28/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: KIMBERLY G SPENCER 1715 PRATT DR. STE 1200 BLACKSBURG, VA 24060	SCC ID NO: 05716253				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: MONTGOMERY 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>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 1715 PRATT DRIVE STE 1200 CITY/ST/ZIP: BLACKSBURG, VA 24060	
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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: KIMBERLY G SPENCER	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: PRESIDENT				
ADDRESS: 1715 PRATT DRIVE STE 1200				
CITY/ST/ZIP/CO: BLACKSBURG, VA 24060				

NAME: MICHAEL J SORIANO	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: TREAS/SEC				
ADDRESS: 1715 PRATT DRIVE, STE 1200				
CITY/ST/ZIP/CO: BLACKSBURG, VA 24060				

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/ MICHAEL J SORIANO	MICHAEL J SORIANO, TREAS/SEC	2/27/2013
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.