

1.) CORPORATION NAME: <b>SATNAM, INC.</b>	DUE DATE: <b>4/30/2014</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>LOOKCHAND KAPOOR 34 CATOCTIN CIR SE STE E LEESBURG, VA</b>	SCC ID NO: <b>05752902</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>LOUDOUN COUNTY</b>	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>2</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	2
CLASS	AUTHORIZED				
COMMON	2				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 34 CATOCTIN CIRCLE SE  
#E

CITY/ST/ZIP: LEESBURG, VA 20175

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: LOOKCHAND KAPOOR		
TITLE: SECRETARY		
ADDRESS: 34 CATOCTIN CIRCLE SE #E		
CITY/ST/ZIP/CO: LEESBURG, VA 20175		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: RAWAL KAPOOR		
TITLE: CONT		
ADDRESS: 34 CATOCTIN CIRCLE #E		
CITY/ST/ZIP/CO: LEESBURG, VA 20175-3633		

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/ LOOKCHAND KAPOOR	LOOKCHAND KAPOOR, SECRETARY	1/1/2015
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.