

1.) CORPORATION NAME: CPM SOLUTIONS, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CHAWEEWAN P MCLAUGHLIN 216 KINNAKEET RUN YORKTOWN, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: YORK COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: VA	DUE DATE: 9/30/2013 SCC ID NO: 05840681 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				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 216 KINNAKEET RUN CITY/ST/ZIP: YORKTOWN, VA 23693
--

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: CHAWEEWAN P MCLAUCHLIN TITLE: PRESIDENT ADDRESS: 216 KINNAKEET RUN CITY/ST/ZIP/CO: YORKTOWN, VA 23693	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
--	---	--

NAME: JOHN MCLAUGHLIN TITLE: SECRETARY ADDRESS: 216 KINNAKETT RUN CITY/ST/ZIP/CO: YORKTOWN, VA 23693	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
---	---	-----------------------------------

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/ JOHN MCLAUGHLIN	JOHN MCLAUGHLIN, SECRETARY	9/26/2013
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.