

|  |   |       |            |        |       |
|--|---|-------|------------|--------|-------|
| <p>1.) CORPORATION NAME:<br/><b>Clean Slate Power Washing Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br/><b>DANIEL E SMITH JR<br/>DANIEL E SMITH JR.<br/>4751 EWELL ROAD UNIT 20<br/><br/>FREDERICKSBURG, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br/><b>SPOTSYLVANIA COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:<br/><b>VA</b></p> | <p>DUE DATE: <b>3/31/2014</b></p> <p>SCC ID NO: <b>06338669</b></p> <p>5.) STOCK INFORMATION</p> <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>1,500</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 1,500 |
| CLASS  | AUTHORIZED  |       |            |        |       |
| COMMON   | 1,500   |       |            |        |       |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4751 EWELL ROAD  
UNIT 20

CITY/ST/ZIP: FREDERICKSBURG, VA 22408

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: DANIEL E SMITH JR<br>TITLE: PRESIDENT<br>ADDRESS: 4751 EWELL ROAD UNIT 20<br>CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22408 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
|---|-------------------------------------|---------|-------------------------------------|----------|

|   |                                     |         |                                     |          |
|---|-------------------------------------|---------|-------------------------------------|----------|
| NAME: LINDA L SMITH<br>TITLE: VICE PRESIDENT<br>ADDRESS: 4751 EWELL ROAD<br>UNIT 20<br>CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22408 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" 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/   |                                  | 3/13/2014 |
| 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.