

1.) CORPORATION NAME: TechMind Solutions Inc.	DUE DATE: 4/30/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ADIL QAZI TECHMIND SOLUTIONS INC 13584 FLYING SQUIRREL DR HERNDON, VA	SCC ID NO: 06352371				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY	5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: VA	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				

6.) PRINCIPAL OFFICE ADDRESS:	
ADDRESS: 13584 FLYING SQUIRREL DR	
CITY/ST/ZIP: HERNDON, VA 20171	

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: ZAREEN QAZI		
TITLE: PRESIDENT		
ADDRESS: 13584 FLYING SQUIRREL DR		
CITY/ST/ZIP/CO: HERNDON, VA 20171		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ADIL QAZI		
TITLE: VICE PRESIDENT		
ADDRESS: 13584 FLYING SQUIRREL DR		
CITY/ST/ZIP/CO: HERNDON, VA 20171		

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/ ZAREEN QAZI	ZAREEN QAZI, PRESIDENT	3/21/2014
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.