

1.) CORPORATION NAME: TOMMY SHIFFLETT TILE CO., INC.	DUE DATE: 4/30/2012				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: TOMMY L SHIFFLETT 7106 CHATEAUGAY LN MIDLOTHIAN, VA 23112	SCC ID NO: 06355739				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CHESTERFIELD 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>100</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100
CLASS	AUTHORIZED				
COMMON	100				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 8401 BALDWIN CREEK RD CITY/ST/ZIP: CHESTERFIELD, VA 23832	
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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: CATHY S SHIFLETT TITLE: CO PRINCIPAL ADDRESS: 8401 BALDWIN CREEK RD CITY/ST/ZIP/CO: CHESTERFIELD, VA 23832	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
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NAME: TOMMY L SHIFFLETT TITLE: DIRECTOR ADDRESS: 8401 BALDWIN CREEK ROAD CITY/ST/ZIP/CO: CHESTERFIELD, VA 23832	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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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/ TOMMY L SHIFFLETT	TOMMY L SHIFFLETT, DIRECTOR	6/26/2012
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.