

1.) CORPORATION NAME: <b>Rame, Inc.</b>	DUE DATE: <b>9/30/2012</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>RAELLEN D ERICKSON 12903 POINT PLEASANT DR FAIRFAX, VA 22033</b>	SCC ID NO: <b>06455869</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>FAIRFAX 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>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED				
COMMON	5,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 12903 POINT PLEASANT DRIVE  CITY/ST/ZIP: FAIRFAX, VA 22033	
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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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MERTON H ERICKSON		
TITLE: P/T		
ADDRESS: 12903 POINT PLEASANT DRIVE		
CITY/ST/ZIP/CO: FAIRFAX, VA 22033		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: RAELEN D ERICKSON		
TITLE: VP/S		
ADDRESS: 12903 PT PLEASANT DRIVE		
CITY/ST/ZIP/CO: FAIRFAX, VA 22033		

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/ MERTON H ERICKSON	MERTON H ERICKSON, P/T	8/13/2012
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.