

1.) CORPORATION NAME: Majestic Enterprises, Inc.	DUE DATE: 2/28/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: LARRY JUSTIN EDWARDS 7511 CARROLLTON PIKE GALAX, VA	SCC ID NO: 06730139				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CARROLL 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>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED				
COMMON	5,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7511 CARROLLTON PIKE

CITY/ST/ZIP: GALAX, VA 24333

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: LARRY JUSTIN EDWARDS TITLE: PRESIDENT ADDRESS: 7511 CARROLLTON PIKE CITY/ST/ZIP/CO: GALAX, VA 24333	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LARRY E EDWARDS TITLE: TREASURER ADDRESS: 7511 CARROLLTON PIKE CITY/ST/ZIP/CO: PALAX, VA 24333	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: AMY E SEMONES TITLE: SECRETARY ADDRESS: 7511 CARROLLTON PIKE CITY/ST/ZIP/CO: GALAX, VA 24333	<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/ LARRY JUSTIN EDWARDS	LARRY JUSTIN EDWARDS,	2/10/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.