

1.) CORPORATION NAME: <b>Students For Liberty, Incorporated</b>	DUE DATE: <b>8/31/2013</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>ALEXANDER MCCOBIN 1800 N OAK ST #1508 ARLINGTON, VA</b>	SCC ID NO: <b>06986244</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>ARLINGTON COUNTY</b>	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: PO BOX 17321  CITY/ST/ZIP: ARLINGTON, VA 22216	
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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: ALEXANDER MCCOBIN TITLE: PRESIDENT ADDRESS: PO BOX 17321 CITY/ST/ZIP/CO: ARLINGTON, VA 22216	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: CLARK RUPER TITLE: VICE PRESIDENT ADDRESS: PO BOX 17321 CITY/ST/ZIP/CO: ARLINGTON, VA 22216	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: SAM ECKMAN TITLE: DIRECTOR ADDRESS: PO BOX 17321 CITY/ST/ZIP/CO: ARLINGTON, VA 22216	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: SLOANE FROST TITLE: DIRECTOR ADDRESS: PO BOX 17321 CITY/ST/ZIP/CO: ARLINGTON, VA 22216	<input 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/ ALEXANDER MCCOBIN	ALEXANDER MCCOBIN, PRESIDENT	9/9/2013
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.