

|   |  |       |            |        |       |
|---|--|-------|------------|--------|-------|
| 1.) CORPORATION NAME:<br><b>Broadleaf, Inc.</b>   | DUE DATE: <b>7/31/2012</b>   |       |            |        |       |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CHRISTOPHER I KACHOUROFF<br/>13649 OFFICE PLACE, STE 101<br/>WOODBIDGE, VA 22192</b> | SCC ID NO: <b>07111586</b>   |       |            |        |       |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>PRINCE WILLIAM COUNTY</b>   | 5.) STOCK INFORMATION<br><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>1,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 1,000 |
| CLASS   | AUTHORIZED   |       |            |        |       |
| COMMON  | 1,000  |       |            |        |       |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>VA</b>   |  |       |            |        |       |

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| 6.) PRINCIPAL OFFICE ADDRESS:<br><br>ADDRESS: 5885 Trinity Parkway<br>Suite 120<br><br>CITY/ST/ZIP: Woodbridge, VA 20120 |  |
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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: VINCENT APESA                 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: PRESIDENT                    |                                     |         |                                     |          |
| ADDRESS: 5448 SHERMAN OAKS COURT    |                                     |         |                                     |          |
| CITY/ST/ZIP/CO: HAYMARKET, VA 20169 |                                     |         |                                     |          |

|                                     |                                     |         |                                     |          |
|-------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: Samuel Pope                   | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: VICE PRESIDENT               |                                     |         |                                     |          |
| ADDRESS: 4641 Spring Run Rd         |                                     |         |                                     |          |
| CITY/ST/ZIP/CO: Warrenton, VA 20187 |                                     |         |                                     |          |

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/ VINCENT APESA                                   | VINCENT APESA, PRESIDENT         | 6/5/2012 |
| 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.