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| 1.) CORPORATION NAME: National Demolition and Environmental, Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: KATHLEEN MCKENNA 8751 TRINITY LANE WARRENTON, VA | DUE DATE: 8/31/2015 SCC ID NO: 07546880 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 | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAUQUIER COUNTY | | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: VA | | | | | |

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| 6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 367 W Shirley Ave CITY/ST/ZIP: WARRENTON, VA 20186 |
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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.

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| NAME: GARY RAPE TITLE: PRESIDENT ADDRESS: 8751 TRINITY LANE CITY/ST/ZIP/CO: WARRENTON, VA 20187 | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
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| NAME: KATHLEEN B T MCKENNA TITLE: DIRECTOR ADDRESS: 19122 FULLER HEIGHTS RD CITY/ST/ZIP/CO: TRIANGLE, VA 22172 | <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.

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| /s/ GARY RAPE | GARY RAPE, PRESIDENT | 9/29/2015 |
| 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.