

1.) CORPORATION NAME:

Lothair International, Inc.

DUE DATE: **1/6/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**PAUL KINNEY LOTT
13995 KHALID LANE
CHANTILLY, VA**

SCC ID NO: **07642093**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 25,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 13995 KHALID LANE

CITY/ST/ZIP: CHANTILLY, VA 20151

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: | BRANDON MICHAEL LOTT | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 13995 KHALID LANE | | |
| CITY/ST/ZIP/CO: | CHANTILLY, VA 20151 | | |

| | | | |
|-----------------|-----------------------|----------------------------------|--|
| NAME: | KATELYN RICHELLE LOTT | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 13995 KHALID LANE | | |
| CITY/ST/ZIP/CO: | CHANTILLY, VA 20151 | | |

| | | | |
|-----------------|------------------------|----------------------------------|--|
| NAME: | NICOLE ALEXANDRIA LOTT | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 13995 KHALID LANE | | |
| CITY/ST/ZIP/CO: | CHANTILLY, VA 20151 | | |

| | | | |
|-----------------|---------------------|----------------------------------|--|
| NAME: | PAUL KINNEY LOTT | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 13995 KHALID LANE | | |
| CITY/ST/ZIP/CO: | CHANTILLY, VA 20151 | | |

| | | | |
|-----------------|-----------------------|----------------------------------|--|
| NAME: | PAUL KINNEY LOTT, JR. | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 13995 KHALID LANE | | |
| CITY/ST/ZIP/CO: | CHANTILLY, VA 20151 | | |

| | | | |
|-----------------|-----------------------|---|--|
| NAME: | PAUL KINNEY LOTT, SR. | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | CHAIRMAN | | |
| ADDRESS: | 13995 KHALID LANE | | |
| CITY/ST/ZIP/CO: | CHANTILLY, VA 20151 | | |

| | | | |
|-----------------|---------------------|----------------------------------|--|
| NAME: | Alysia Justine Lott | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 13995 Khalid LN | | |
| CITY/ST/ZIP/CO: | Chantilly, VA 20151 | | |

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.

| | | |
|---|--|-----------------|
| <u>/s/ PAUL KINNEY LOTT, SR.</u> | <u>PAUL KINNEY LOTT, SR.,</u> | <u>1/6/2014</u> |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | CHAIRMAN 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.