

1.) CORPORATION NAME: A1-Speedlimit Driving School Corp.	DUE DATE: 7/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: TAVONDA NESCHELL CONYERS 10310 MEMORY LANE SUITE 1E CHESTERFIELD, VA	SCC ID NO: 07669310				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CHESTERFIELD 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>1</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1
CLASS	AUTHORIZED				
COMMON	1				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 10310 MEMORY LANE SUITE 1E CITY/ST/ZIP: CHESTERFIELD, VA 23832	
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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.

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TAVONDA NESCHELL CONYERS		
TITLE: DIRECTOR		
ADDRESS: 10310 MEMORY LANE SUITE 1E		
CITY/ST/ZIP/CO: CHESTERFIELD, VA 23832		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Tequila Conyers Ranson		
TITLE: Manager		
ADDRESS: 4536 Chippoke rd		
CITY/ST/ZIP/CO: Chester , VA 23231		

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/ TAVONDA NESCHELL CONYERS	TAVONDA NESCHELL CONYERS, DIRECTOR	6/9/2014
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.