

1.) CORPORATION NAME: <b>Bear Branch Brewing Company</b>	DUE DATE: <b>4/30/2015</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>LISA SUSANNE GIOVARELLI 8107 REVATOM CT. DUNN LORING, VA</b>	SCC ID NO: <b>07769854</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>FAIRFAX COUNTY</b>	5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	<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				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8107 REVATOM CT.  
CITY/ST/ZIP: DUNN LORING, VA 22027

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: LISA SUSANNE GIOVARELLI		
TITLE: DIRECTOR		
ADDRESS: 8107 REVATOM CT.		
CITY/ST/ZIP/CO: DUNN LORING, VA 22027		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KIMBERLY ANN MAYS		
TITLE: DIRECTOR		
ADDRESS: 8107 REVATOM CT.		
CITY/ST/ZIP/CO: DUNN LORING, VA 22027		

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/ LISA SUSANNE GIOVARELLI	LISA SUSANNE GIOVARELLI, DIRECTOR	5/16/2015
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.