

1.) CORPORATION NAME:

**LCdO, Inc.**

DUE DATE: **7/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOHN BYRON LOEFFLER  
124 OLD MILL ROAD  
WARM SPRINGS, VA**

SCC ID NO: **07808389**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	20

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**BATH COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO Box 1300

CITY/ST/ZIP: HOT SPRINGS, VA 24445

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: KYLE ANDREW KRIEGER  
TITLE: DIRECTOR  
ADDRESS: 134 SUNSET RIDGE  
CITY/ST/ZIP/CO: CALDWELL, WV 24925

OFFICER  DIRECTOR

NAME: CRYSTAL DAWN KRIEGER  
TITLE: DIRECTOR  
ADDRESS: 134 SUNSET RIDGE  
CITY/ST/ZIP/CO: CALDWELL, WV 24925

OFFICER  DIRECTOR

NAME: JOHN BYRON LOEFFLER  
TITLE: DIRECTOR  
ADDRESS: 124 OLD MILL ROAD  
CITY/ST/ZIP/CO: WARM SPRINGS, VA 24484

OFFICER  DIRECTOR

NAME: KATHERINE ANN LOEFFLER  
TITLE: DIRECTOR  
ADDRESS: 124 OLD MILL ROAD  
CITY/ST/ZIP/CO: WARM SPRINGS, VA 24484

OFFICER  DIRECTOR

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/ KYLE ANDREW KRIEGER  
SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

KYLE ANDREW KRIEGER,  
DIRECTOR  
PRINTED NAME AND CORPORATE  
TITLE

9/17/2015  
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.