

1.) CORPORATION NAME: GALI SERVICE INDUSTRIES, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: MD	DUE DATE: 4/30/2016 SCC ID NO: F1122201 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>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 12312 Wilkins Avenue CITY/ST/ZIP: Rockville, MD 20852
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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.

NAME: MARK TERRENZI TITLE: EXECUTIVE VP ADDRESS: 12312 WILKINS AVENUE CITY/ST/ZIP/CO: ROCKVILLE, MD 20852	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: FRANCISCO GALI TITLE: CEO/TREAS/CFO ADDRESS: 12312 WILKINS AVENUE CITY/ST/ZIP/CO: ROCKVILLE, MD 20852	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: LEROY DOCK TITLE: COO ADDRESS: 12312 WILKINS AVENUE CITY/ST/ZIP/CO: ROCKVILLE, MD 20852	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> 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/ MARK TERRENZI	MARK TERRENZI, EXECUTIVE VP	4/5/2016
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.