

1.) CORPORATION NAME:

DUE DATE: **5/31/2014**

Datalogic Automation, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1227612**

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER, 16TH FLOOR
1111 EAST MAIN STREET**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 1,000 |

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 511 SCHOOL HOUSE RD.

CITY/ST/ZIP: TELFORD, PA 18969

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: | GIAN PAOLO FEDRIGO | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 511 SCHOOL HOUSE RD | | |
| CITY/ST/ZIP/CO: | TELFORD, PA 18969 | | |
| NAME: | DARRELL OWEN | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 511 SCHOOL HOUSE RD | | |
| CITY/ST/ZIP/CO: | TELFORD, PA 18969 | | |
| NAME: | STANLEY SROKA | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 511 SCHOOL HOUSE RD | | |
| CITY/ST/ZIP/CO: | TELFORD, PA 18969 | | |
| NAME: | VALERIE BORCHEVSKY | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | 511 SCHOOL HOUSE RD | | |
| CITY/ST/ZIP/CO: | TELFORD, PA 18969 | | |
| NAME: | TODD HAGERICH | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 511 SCHOOL HOUSE RD | | |
| CITY/ST/ZIP/CO: | TELFORD, PA 18969 | | |
| NAME: | MIRKO MESSERA | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 511 SCHOOL HOUSE RD | | |
| CITY/ST/ZIP/CO: | TELFORD, PA 18969 | | |

| | | | |
|--|---|----------------------------------|--|
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | BILL PARNELL DIRECTOR 511 SCHOOL HOUSE RD TELFORD, PA 18969 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | ANDREA ESPOSITO DIRECTOR 511 SCHOOL HOUSE RD TELFORD, PA 18969 | <input type="checkbox"/> OFFICER | <input checked="" 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/ VALERIE BORCHEVSKY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | VALERIE BORCHEVSKY, SECRETARY PRINTED NAME AND CORPORATE TITLE | 3/31/2014 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. | | | |