

1.) CORPORATION NAME: <b>Tensar International Corporation</b>	DUE DATE: <b>5/31/2014</b>						
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>NATIONAL CORPORATE RESEARCH LTD 250 BROWNS HILL COURT MIDLOTHIAN, VA</b>	SCC ID NO: <b>F1279290</b>						
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>CHESTERFIELD COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMMON</td> <td>10,000</td> </tr> <tr> <td>PREFER</td> <td>10,000</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMMON	10,000	PREFER	10,000
CLASS	AUTHORIZED						
COMMON	10,000						
PREFER	10,000						
4.) STATE OR COUNTRY OF INCORPORATION: <b>GA</b>							

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 2500 NORTHWINDS PKWY STE 500  CITY/ST/ZIP: ALPHARETTA, GA 30009	
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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: DAVID MORRIS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
TITLE: VP, CFO			
ADDRESS: 2500 NORTHWINDS PKWY STE 500			
CITY/ST/ZIP/CO: ALPHARETTA, GA 30009			

NAME: DEAN DITMAR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
TITLE: VICE PRESIDENT			
ADDRESS: 2500 NORTHWINDS PKWY STE 500			
CITY/ST/ZIP/CO: ALPHARETTA, GA 30009			

NAME: ROBERT F BRIGGS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
TITLE: SECRETARY			
ADDRESS: 2500 NORTHWINDS PKWY STE 500			
CITY/ST/ZIP/CO: ALPHARETTA, GA 30009			

NAME: DONALD MELTZER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
TITLE: CEO			
ADDRESS: 2500 NORTHWINDS PKWY STE 500			
CITY/ST/ZIP/CO: ALPHARETTA, GA 30009			

NAME: Willy Liew	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
TITLE: ENGINEERING			
ADDRESS: 2500 NORTHWINDS PARKWAY, SUITE 500			
CITY/ST/ZIP/CO: ALPHARETTA, GA 30009			

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/ ROBERT F BRIGGS	ROBERT F BRIGGS, SECRETARY	5/30/2014
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.