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| 1.) CORPORATION NAME: NAMIC - MID-ATLANTIC, INC. | DUE DATE: 6/30/2013 |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA | SCC ID NO: F1411653 |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY | 5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/> |
| 4.) STATE OR COUNTRY OF INCORPORATION: CO | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3076 CENTREVILLE RD
STE 110

CITY/ST/ZIP: HERNDON, VA 20171

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.

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|--------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: Joelle Patience | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: PRESIDENT | | | | |
| ADDRESS: 1235 W Street, NE | | | | |
| CITY/ST/ZIP/CO: WASHINGTON, DC 20018 | | | | |

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|--------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: Jason Rademacher | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: VICE PRESIDENT | | | | |
| ADDRESS: 1200 New Hampshire Ave, NW | | | | |
| CITY/ST/ZIP/CO: WASHINGTON, DC 20036 | | | | |

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|-------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: PATRICK CASTRO | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: TREASURER | | | | |
| ADDRESS: 2800 S. Shirlington Road | | | | |
| CITY/ST/ZIP/CO: Arlington, VA 22206 | | | | |

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|--------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: Chawn Jackson | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: SECRETARY | | | | |
| ADDRESS: 1500 Eckington Place NE | | | | |
| CITY/ST/ZIP/CO: Washington, DC 20002 | | | | |

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.

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|---|----------------------------------|-----------|
| /s/ Joelle Patience | Joelle Patience, PRESIDENT | 6/12/2013 |
| 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.