

1.) CORPORATION NAME: CedarCrestone, Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street RICHMOND, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY 4.) STATE OR COUNTRY OF INCORPORATION: DE	DUE DATE: 2/28/2014 SCC ID NO: F1500901 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: 1255 ALDERMAN DRIVE CITY/ST/ZIP: ALPHARETTA, GA 30005
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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: CALVIN YONKER TITLE: PRESIDENT ADDRESS: 1255 ALDERMAN DRIVE CITY/ST/ZIP/CO: ALPHARETTA, GA 30005-1727	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: BRIAN FEES TITLE: TREASURER ADDRESS: 1255 ALDERMAN DRIVE SUITE 120 CITY/ST/ZIP/CO: ALPHARETTA, GA 30005-1727	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: DALE COGGINS TITLE: SECRETARY ADDRESS: FEDERAL RESERVE PLAZA 600 ATLANTIC AVE BOSTON, MA 02210 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ DALE COGGINS	DALE COGGINS, SECRETARY	12/31/2013
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.