

| | | | | | |
|---|--|-------|------------|--------|--------|
| 1.) CORPORATION NAME: MORRIS & GARRITANO INSURANCE AGENCY, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: CA | DUE DATE: 9/30/2012 SCC ID NO: F1524620 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>10,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 10,000 |
| CLASS | AUTHORIZED | | | | |
| COMMON | 10,000 | | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1122 LAUREL LN
 CITY/ST/ZIP: SAN LUIS OBISPO, CA 93401

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: GREGORY R MORRIS TITLE: PRESIDENT ADDRESS: 1122 LAUREL LANE CITY/ST/ZIP/CO: SAN LUIS OBISPO, CA 93401 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | |
|--|---|-----------------------------------|--|

| | | | |
|---|---|-----------------------------------|--|
| NAME: J BRENDAN MORRIS TITLE: VICE PRESIDENT ADDRESS: 1122 LAUREL LANE CITY/ST/ZIP/CO: SAN LUIS OBISPO, CA 93401 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | |
|---|---|-----------------------------------|--|

| | | | |
|--|---|-----------------------------------|--|
| NAME: GENE GARRITANO TITLE: S/T ADDRESS: 1122 LAUREL LANE CITY/ST/ZIP/CO: SAN LUIS OBISPO, CA 93401 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | |
|--|---|-----------------------------------|--|

| | | | |
|---|---|--|--|
| NAME: KERRY MORRIS TITLE: COO ADDRESS: 1122 LAUREL LN. CITY/ST/ZIP/CO: SAN LUIS OBISPO, CA 93401 | <input checked="" 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/ GREGORY R MORRIS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | GREGORY R MORRIS, PRESIDENT PRINTED NAME AND CORPORATE TITLE | 10/19/2012 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.