

1.) CORPORATION NAME:

**DIAMOND POWER INTERNATIONAL, INC.**

DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1533126**

5.) STOCK INFORMATION

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

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2600 E. Main Street  
P.O. Box 415

CITY/ST/ZIP: Lancaster, OH 43130

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.

|   |   |  |
|---|---|--|
| <p>NAME: Maurice Barr<br/>TITLE: PRESIDENT<br/>ADDRESS: 2600 E. Main Street<br/>P.O. Box 415<br/>CITY/ST/ZIP/CO: Lancaster, OH 43130</p>          | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| <p>NAME: Jenny L Apker<br/>TITLE: TREASURER<br/>ADDRESS: 2600 E. Main Street<br/>P.O. Box 415<br/>CITY/ST/ZIP/CO: Lancaster, OH 43130</p>         | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| <p>NAME: Benjamin H. Bash<br/>TITLE: ASST SECRETARY<br/>ADDRESS: 2600 E. Main Street<br/>P.O. Box 415<br/>CITY/ST/ZIP/CO: Lancaster, OH 43130</p> | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| <p>NAME: James D. Canafax<br/>TITLE: SECRETARY<br/>ADDRESS: 2600 E. Main Street<br/>P.O. Box 415<br/>CITY/ST/ZIP/CO: Lancaster, OH 43130</p>      | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| <p>NAME: J. Randall Data<br/>TITLE: DIRECTOR<br/>ADDRESS: 2600 E. Main Street<br/>P.O. Box 415<br/>CITY/ST/ZIP/CO: Lancaster, OH 43130</p>        | <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/ James D. Canafax   | James D. Canafax, SECRETARY      | 11/12/2013 |
| 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. |                                  |            |