

<p>1.) CORPORATION NAME: Olde Potowmack Title & Escrow Company</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: BRIAN D WEST 8500 LEESBURG PIKE SUITE 407 VIENNA, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: MD</p>	<p>DUE DATE: 8/31/2013</p> <p>SCC ID NO: F1576745</p> <p>5.) STOCK INFORMATION</p> <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 style="text-align: center;">1,000</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4905 Del Ray Avenue #507

CITY/ST/ZIP: BETHESDA, MD 20814

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JON D PELS		
TITLE: PRESIDENT		
ADDRESS: 4905 Del Ray Avenue #507		
CITY/ST/ZIP/CO: BETHESDA, MD 20814		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LAWRENCE J ANDERSON		
TITLE: TREASURER		
ADDRESS: 4905 Del Ray Avenue #507		
CITY/ST/ZIP/CO: BETHESDA, MD 20814		

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/ JON D PELS	JON D PELS, PRESIDENT	10/21/2013
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.