

1.) CORPORATION NAME:

**TYONEK SERVICES GROUP, INC.**

DUE DATE: **12/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COS RD STE 301  
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1691155**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**AK**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1689 C STREET SUITE 219

CITY/ST/ZIP: ANCHORAGE, AK 99501-5131

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: KEVIN S DIXON TITLE: PRESIDENT ADDRESS: 1689 C ST STE 219 CITY/ST/ZIP/CO: ANCHORAGE, AK 99501-5131</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: BART GARBER TITLE: DIRECTOR ADDRESS: 1689 C ST STE 219 CITY/ST/ZIP/CO: ANCHORAGE, AK 99501-5131</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: SUSANNA MOON TITLE: DIRECTOR ADDRESS: 1689 C STREET STE 219 CITY/ST/ZIP/CO: ANCHORAGE, AK 99501</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: ELIZABETH STANDIFER TITLE: SECRETARY ADDRESS: 1689 C STREET, STE 219 CITY/ST/ZIP/CO: ANCHORAGE, AK 99501-5131</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: SHARON WILLIFORD TITLE: DIRECTOR ADDRESS: 1689 C STREET, STE 219 CITY/ST/ZIP/CO: ANCHORAGE, AK 99501-5131</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Jaison Standifer TITLE: DIRECTOR ADDRESS: 1689 C Street, Suite 219 CITY/ST/ZIP/CO: Anchorage, AK 99501-5131</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/ KEVIN S DIXON	KEVIN S DIXON, PRESIDENT	10/26/2012
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.		