

| | | | | | |
|---|---|-------|------------|--------|-------|
| 1.) CORPORATION NAME: SOUTHERN FASTENING SYSTEMS, INC. | DUE DATE: 4/30/2013 | | | | |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: NATIONAL CORPORATE RESEARCH, LTD. 250 BROWNS HILL COURT MIDLOTHIAN, VA 23114 | SCC ID NO: F1703844 | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CHESTERFIELD COUNTY | 5.) STOCK INFORMATION | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: DE | <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>2,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 2,000 |
| CLASS | AUTHORIZED | | | | |
| COMMON | 2,000 | | | | |

| | |
|--------------------------------------|--|
| 6.) PRINCIPAL OFFICE ADDRESS: | |
| ADDRESS: 635 FAIRGROUNDS RD | |
| CITY/ST/ZIP: MUSCLE SHOALS, AL 35661 | |

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: STEVE MCKINNEY TITLE: PRES/DIR ADDRESS: 635 FAIRGROUNDS RD CITY/ST/ZIP/CO: MUSCLE SHOALS, AL 35661 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: JOE MCKINNEY TITLE: VP/DIR ADDRESS: 635 FAIRGROUNDS RD CITY/ST/ZIP/CO: MUSCLE SHOALS, AL 35661 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: CHESTER MCKINNEY TITLE: SEC/TREA/DIR ADDRESS: 635 FAIRGROUNDS RD CITY/ST/ZIP/CO: MUSCLE SHOALS, AL 35661 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: philip w fowler TITLE: cfo ADDRESS: 635 fairgrounds road CITY/ST/ZIP/CO: muscle shoals, AL 35661 | <input checked="" type="checkbox"/> | OFFICER | <input 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/ philip w fowler | philip w fowler, | 2/8/2013 |
| 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.