

1.) CORPORATION NAME: <b>CLEMMONS FINANCIAL GROUP, INC.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>ALAN BALDWIN          116 STALEY STREET          MARION, VA</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>SMYTH COUNTY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>NC</b>	DUE DATE: <b>6/30/2014</b> SCC ID NO: <b>F1712480</b> 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>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 116 Staley St

CITY/ST/ZIP: MARION, VA 24354

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: MARK NIETERS		
TITLE: PRESIDENT		
ADDRESS: 6000 MEADOWBROOK MALL, SUITE 5A		
CITY/ST/ZIP/CO: PO BOX 1796 CLEMMONS, NC 27012		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ALAN BALDWIN		
TITLE: DIRECTOR		
ADDRESS: 201 EAST MAIN STREET		
CITY/ST/ZIP/CO: CENTER SQ. BLDG., SUITE 150 MARION, VA 24354		

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/ MARK NIETERS	MARK NIETERS, PRESIDENT	6/20/2014
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.