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|--|---|-------|------------|--------|---------|
| 1.) CORPORATION NAME:<br><b>LAWLEY SERVICE, INC.</b>   | DUE DATE: <b>8/31/2014</b>  |       |            |        |         |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CORPORATION SERVICE COMPANY<br/>         BANK OF AMERICA CENTER, 16TH FLOOR<br/>         1111 EAST MAIN STREET<br/><br/>         RICHMOND, VA</b> | SCC ID NO: <b>F1720152</b>  |       |            |        |         |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>RICHMOND CITY</b>  | 5.) STOCK INFORMATION<br><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>252,500</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 252,500 |
| CLASS  | AUTHORIZED  |       |            |        |         |
| COMMON   | 252,500   |       |            |        |         |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>NY</b>  |   |       |            |        |         |

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| 6.) PRINCIPAL OFFICE ADDRESS:<br><br>ADDRESS: 361 DELAWARE AVE<br><br>CITY/ST/ZIP: BUFFALO, NY 14202 |  |
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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.

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|---|---|--|--|
| NAME: WILLIAM J LAWLEY SR<br>TITLE: PRESIDENT<br>ADDRESS: 73 BARBERRY LANE<br>CITY/ST/ZIP/CO: WILLIAMSVILLE, NY 14221 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|---|---|--|--|
| NAME: WILLIAM J LAWLEY JR<br>TITLE: VP SEC<br>ADDRESS: 99 HIGH PARK BLVD.<br>CITY/ST/ZIP/CO: SNYDER, NY 14226 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|---|---|--|--|
| NAME: CHRISTOPHER D ROSS<br>TITLE: VP/T<br>ADDRESS: 90 MEADOW ROAD<br>CITY/ST/ZIP/CO: BUFFALO, NY 14216 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|   |                                  |  |  |
|---|----------------------------------|--|--|
| NAME: MICHAEL R LAWLEY<br>TITLE: DIRECTOR<br>ADDRESS: 361 DELAWARE AVE<br>CITY/ST/ZIP/CO: BUFFALO, NY 14202 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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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/ WILLIAM J LAWLEY JR                             | WILLIAM J LAWLEY JR, VP SEC      | 10/15/2014 |
| 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.