

1.) CORPORATION NAME: MARINE SOLUTIONS INC.	DUE DATE: 7/31/2012				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: OLD DOMINION FILINGS LLC 7400 BEAUFONT SPRINGS DR STE 300 RICHMOND, VA 23225	SCC ID NO: F1761685				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY	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				
4.) STATE OR COUNTRY OF INCORPORATION: KY					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 225 Industry Parkway CITY/ST/ZIP: Nicholasville, KY 40356	
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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.

NAME: AMY N WILKINS TITLE: BOTH ADDRESS: 225 Industry Pkwy CITY/ST/ZIP/CO: Nicholasville, KY 40356	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: DON W WILKINS TITLE: BOTH ADDRESS: 225 Industry Pkwy CITY/ST/ZIP/CO: Nicholasville, KY 40356	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: MARK ISAACS TITLE: DIRECTOR ADDRESS: 2228 NEWMARKET WAY CITY/ST/ZIP/CO: LEXINGTON, KY 40504	<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/ AMY N WILKINS	AMY N WILKINS, BOTH	7/23/2012
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.