

|  |   |       |            |        |            |
|--|---|-------|------------|--------|------------|
| 1.) CORPORATION NAME:<br><b>Logical Choice Technologies, Inc.</b>  | DUE DATE: <b>9/30/2011</b>  |       |            |        |            |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CT CORPORATION SYSTEM<br/>4701 COX RD STE 301<br/>GLEN ALLEN, VA 23060-6802</b> | SCC ID NO: <b>F1768656</b>  |       |            |        |            |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>HENRICO COUNTY</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>20,000,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 20,000,000 |
| CLASS  | AUTHORIZED  |       |            |        |            |
| COMMON   | 20,000,000  |       |            |        |            |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>GA</b>  |   |       |            |        |            |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1045 PROGRESS CIRCLE

CITY/ST/ZIP: LAWRENCEVILLE, GA 30043

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: CYNTHIA KAYE<br>TITLE: CEO<br>ADDRESS: 1045 PROGRESS CIRCLE<br>CITY/ST/ZIP/CO: LAWRENCEVILLE, GA 30043 |   |  |

|   |   |                                   |
|---|---|-----------------------------------|
|   | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: Sheri L Lofgren<br>TITLE: TREASURER<br>ADDRESS: 1045 Progress Circle<br>CITY/ST/ZIP/CO: Lawrenceville, GA 30043 |   |                                   |

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/ Sheri L Lofgren                                 | Sheri L Lofgren,                 | 5/24/2012 |
| 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.