

1.) CORPORATION NAME: Agent Pipeline, Inc.	DUE DATE: 6/30/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: VIRGINIA PROFESSIONAL SERVICES LLC 3850 Gaskins Rd., Suite 120 Richmond, VA	SCC ID NO: F1794389				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </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: WV					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 114 SMILEY DR.
STE 1

CITY/ST/ZIP: ST. ALBANS, WV 25177

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: BENJAMIN KIMBLE TITLE: PRESIDENT ADDRESS: 2 SMILEY DRIVE STE 1 CITY/ST/ZIP/CO: ST. ALBANS, WV 25177	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: LAURA K KIMBLE TITLE: VICE PRESIDENT ADDRESS: 2 SMILEY DRIVE STE 1 CITY/ST/ZIP/CO: ST. ALBANS, WV 25177	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: ROBERT L KIMBLE TITLE: CEO ADDRESS: 11901 SE 171ST STREET CITY/ST/ZIP/CO: JUPITER, FL 33469	<input checked="" type="checkbox"/> OFFICER	<input 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/ BENJAMIN KIMBLE	BENJAMIN KIMBLE, PRESIDENT	9/2/2015
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.