

1.) CORPORATION NAME: MTS SERVICES OF BEDFORD, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY BANK OF AMERICA CENTER, 16TH FLOOR 1111 EAST MAIN STREET RICHMOND, VA	DUE DATE: 10/31/2015 SCC ID NO: F1805904 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>300</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	300
CLASS	AUTHORIZED				
COMMON	300				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY					
4.) STATE OR COUNTRY OF INCORPORATION: NH					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 13 DELTA DRIVE, SUITE 7 CITY/ST/ZIP: LONDONDERRY, NH 03053

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: JUDITH B BERGERON TITLE: PRESIDENT ADDRESS: 13 DELTA DRIVE SUITE 7 CITY/ST/ZIP/CO: LONDONDERRY, NH 03053	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: THOMAS R BANKS TITLE: CEO ADDRESS: 13 DELTA DRIVE, STE 7 CITY/ST/ZIP/CO: LONDONBERRY, NH 03053	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: CRAIG GILROY TITLE: ASST SECRETARY ADDRESS: 13 DELTA DRIVE, SUITE 7 CITY/ST/ZIP/CO: LONDONDERRY, NH 03053	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	

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/ CRAIG GILROY	CRAIG GILROY, ASST SECRETARY	10/1/2015
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.