

1.) CORPORATION NAME: Service Guarantee and Surety Co. (USED IN VA BY:THE SERVICE INSURANCE COMPANY, INC.) 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: VIRGINIA PROFESSIONAL SERVICES LLC 3850 Gaskins Rd., Suite 120 Richmond, VA 23233 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: NJ	DUE DATE: 8/31/2012 SCC ID NO: F1833419 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>50,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	50,000
CLASS	AUTHORIZED				
COMMON	50,000				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 80 MAIN ST STE 330 CITY/ST/ZIP: WEST ORANGE, NJ 07052
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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: JAMES BURGER TITLE: PRES/DTR ADDRESS: 80 MAIN ST STE 330 CITY/ST/ZIP/CO: WEST ORANGE, NJ 07052	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: GLEN BURGER TITLE: SEC/TREAS/DTR ADDRESS: 80 MAIN ST STE 330 CITY/ST/ZIP/CO: WEST ORANGE, NJ 07052	<input checked="" 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/ JAMES BURGER	JAMES BURGER, PRES/DTR	6/21/2012
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.