

1.) CORPORATION NAME: Sauder Manufacturing Co.	DUE DATE: 10/31/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: NATIONAL REGISTERED AGENTS INC 4701 COX ROAD SUITE 301 GLEN ALLEN, VA	SCC ID NO: F1838640				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse;"> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>30,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	30,000
CLASS	AUTHORIZED				
COMMON	30,000				
4.) STATE OR COUNTRY OF INCORPORATION: OH					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 930 WEST BARRE RD

CITY/ST/ZIP: ARCHBOLD, OH 43502

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: PHILIP BONTRAGER TITLE: PRESIDENT ADDRESS: 930 W BARRE RD CITY/ST/ZIP/CO: ARCHBOLD, OH 43502	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: WILLIAM OGDEN TITLE: SECRETARY ADDRESS: 930 W BARRE RD CITY/ST/ZIP/CO: ARCHBOLD, OH 43502	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: KEVIN SAUDER TITLE: DIRECTOR ADDRESS: 502 MIDDLE ST CITY/ST/ZIP/CO: ARCHBOLD, OH 43502	<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/ PHILIP BONTRAGER	PHILIP BONTRAGER, PRESIDENT	8/27/2013
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.