

1.) CORPORATION NAME: Galileo Solutions, Ltd.	DUE DATE: 7/31/2012
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: NATIONAL CORPORATE RESEARCH LTD 250 BROWNS HILL CT MIDLOTHIAN, VA	SCC ID NO: F1868670
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CHESTERFIELD COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: NE	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10665 Bedford Avenue, Ste 102

CITY/ST/ZIP: OMAHA, NE 68134

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 type="checkbox"/> DIRECTOR
NAME: MAURICE J MICEK		
TITLE: PRESIDENT		
ADDRESS: 10665 BEDFORD AVENUE		
CITY/ST/ZIP/CO: SUITE 102 OMAHA, NE 68134		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: CONNIE L. TOWNSEND		
TITLE: ASST SECRETARY		
ADDRESS: 10665 BEDFORD AVE, STE 102		
CITY/ST/ZIP/CO: OMAHA, NE 68134		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: WILLIAM P MACK		
TITLE: SECY TREAS		
ADDRESS: 10665 BEDFORD AVE, STE 102		
CITY/ST/ZIP/CO: SUITE 102 OMAHA, NE 68134		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MAURICE J MICEK		
TITLE: DIRECTOR		
ADDRESS: 10665 BEDFORD AVE, STE 102		
CITY/ST/ZIP/CO: SUITE 102 OMAHA, NE 68134		

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/ CONNIE L. TOWNSEND	CONNIE L. TOWNSEND, ASST SECRETARY	4/19/2013
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.