

1.) CORPORATION NAME: BLACK DIAMOND SOLUTIONS, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CHRISTOPHER CRAIG 19214 BURNT BRIDGE DRIVE LEESBURG, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: LOUDOUN COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: DE	DUE DATE: 2/28/2014 SCC ID NO: F1887019 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>1,500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,500
CLASS	AUTHORIZED				
COMMON	1,500				

6.) PRINCIPAL OFFICE ADDRESS:	
ADDRESS: 19214 BURNT BRIDGE DR.	
CITY/ST/ZIP: LEESBURG, VA 20176	

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 checked="" type="checkbox"/> DIRECTOR
NAME: CHRISTOPHER CRAIG		
TITLE: TREASURER		
ADDRESS: 1921 BURNT BRIDGE DR.		
CITY/ST/ZIP/CO: LEESBURG, VA 20176		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ANDREA REYES		
TITLE: PRESIDENT		
ADDRESS: 19214 BURNT BRIDGE DRIVE		
CITY/ST/ZIP/CO: LEESBURG, VA 20176		

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/ CHRISTOPHER CRAIG	CHRISTOPHER CRAIG, TREASURER	4/3/2014
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.