

| 1.) CORPORATION NAME:<br><b>The Aulson Co., Inc. of MA (USED IN VA BY: TheAulson Co., Inc.)</b>  | DUE DATE: <b>11/30/2014</b><br><br>SCC ID NO: <b>F1912734</b>   |       |            |        |        |
|--|---|-------|------------|--------|--------|
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>NORTHWEST REGISTERED AGENT LLC<br/>         4445 CORPORATION LN STE 264<br/>         VIRGINIA BEACH, VA</b> | 5.) STOCK INFORMATION<br><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>10,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 10,000 |
| CLASS  | AUTHORIZED  |       |            |        |        |
| COMMON   | 10,000  |       |            |        |        |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>VIRGINIA BEACH CITY</b>  |   |       |            |        |        |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>MA</b>  |   |       |            |        |        |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 49 DANTON DR

CITY/ST/ZIP: METHUEN, MA 01844

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: ALAN P AULSON, SR<br>TITLE: PRESIDENT<br>ADDRESS: 49 DANTON DR<br>CITY/ST/ZIP/CO: METHUEN, MA 01844 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
|---|-------------------------------------|---------|-------------------------------------|----------|

|  |                                     |         |                          |          |
|--|-------------------------------------|---------|--------------------------|----------|
| NAME: MAUREEN AULSON<br>TITLE: SEC/TREAS<br>ADDRESS: 49 DANTON DR<br>CITY/ST/ZIP/CO: METHUEN, MA 01844 | <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/ ALAN P AULSON, SR                               | ALAN P AULSON, SR, PRESIDENT     | 5/27/2015 |
| 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.