

1.) CORPORATION NAME:

Dutch Valley Transportation, Inc.

DUE DATE: **2/28/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
1111 E MAIN ST 16TH FL
RICHMOND, VA**

SCC ID NO: **F1919689**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 1,000,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7615 LANCASTER AVENUE

CITY/ST/ZIP: MYERSTOWN, PA 17067

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.

| | | |
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| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: MATTHEW BURKHOLDER | | |
| TITLE: PRES/TREAS/SECY | | |
| ADDRESS: 7615 LANCASTER AVENUE | | |
| CITY/ST/ZIP/CO: MYERSTOWN, PA 17067 | | |

| | | |
|-------------------------------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: MICHAEL LONGENECKER | | |
| TITLE: ASST CONTROLLER | | |
| ADDRESS: 7615 LANCASTER AVENUE | | |
| CITY/ST/ZIP/CO: MYERSTOWN, PA 17067 | | |

| | | |
|-------------------------------------|----------------------------------|--|
| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: LANE BURKHOLDER | | |
| TITLE: DIRECTOR | | |
| ADDRESS: 7615 LANCASTER AVENUE | | |
| CITY/ST/ZIP/CO: MYERSTOWN, PA 17067 | | |

| | | |
|-------------------------------------|----------------------------------|--|
| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: CORBY BURKHOLDER | | |
| TITLE: DIRECTOR | | |
| ADDRESS: 7615 LANCASTER AVENUE | | |
| CITY/ST/ZIP/CO: MYERSTOWN, PA 17067 | | |

| | | |
|-------------------------------------|----------------------------------|--|
| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: MELVIN BURKHOLDER | | |
| TITLE: DIRECTOR | | |
| ADDRESS: 7615 LANCASTER AVENUE | | |
| CITY/ST/ZIP/CO: MYERSTOWN, PA 17067 | | |

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/ MICHAEL LONGENECKER | MICHAEL LONGENECKER, ASST CONTROLLER | 1/12/2015 |
| 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.