

1.) CORPORATION NAME: Linkage, Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: LONNEY GREGORY 13666 BENT TREE CIR #101 CENTREVILLE, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: MA	DUE DATE: 6/30/2015 SCC ID NO: F1965013 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>100,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100,000
CLASS	AUTHORIZED				
COMMON	100,000				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 200 WHEELER RD CITY/ST/ZIP: BURLINGTON, MA 01803

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: HARLEY OSTIS TITLE: PRESIDENT ADDRESS: 200 WHEELER RD CITY/ST/ZIP/CO: BURLINGTON, MA 01803	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: RICHARD PUMFREY TITLE: COO ADDRESS: 200 WHEELER RD CITY/ST/ZIP/CO: BURLINGTON, MA 01803	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: PHILIP HARKINS TITLE: DIRECTOR ADDRESS: 200 WHEELER RD CITY/ST/ZIP/CO: BURLINGTON, MA 01803	<input type="checkbox"/>	OFFICER	<input checked="" 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/ HARLEY OSTIS	HARLEY OSTIS, PRESIDENT	6/5/2015
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.