

State of Delaware Annual Franchise Tax Report

SDOCALJ

CORPORATION NAME
[REDACTED], INC. TAX YR.
2015

FILE NUMBER [REDACTED] INCORPORATION DATE 2012/06/11 RENEWAL/REVOCATION DATE [REDACTED] PHONE NUMBER [REDACTED]

PRINCIPAL PLACE OF BUSINESS [REDACTED] STREET/CITY/STATE/ZIP [REDACTED]

REGISTERED AGENT
DELAWARE INCORPORATORS & REGISTRATION SERVICE, LLC 9205630
 301 NORTH MARKET STREET
 SUITE 1410, FARMERS BANK BLDG
WILMINGTON **DE 19801**

AUTHORIZED STOCK BEGIN DATE	END DATE	DESIGNATION/ STOCK CLASS	NO. OF SHARES	PAR VALUE/ SHARE
2012/06/11		COMMON	10,000,000	.000100

OFFICER [REDACTED] NAME [REDACTED] STREET/CITY/STATE/ZIP [REDACTED]

DIRECTORS [REDACTED] NAME [REDACTED] STREET/CITY/STATE/ZIP [REDACTED]

Total number of directors: [REDACTED]

NOTICE: Pursuant to 8 Del. C. 502(b), If any officer or director of a corporation required to make an annual franchise tax report to the Secretary of State shall knowingly make any false statement in the report, such officer or director shall be guilty of perjury.

Authorized by (officer, director or incorporator) (street, city, state, postal code(zip) and country)

Signature (X) [REDACTED] date [REDACTED] title [REDACTED]

