

COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

Office of the Clerk

August 2, 2011

MONIQUE R STINSON 2404 A STRIPED MAPLE CIRCLE HERNDON, VA 20171

RECEIPT

RE: Monique's Technical Group, LLC

ID: S170452 - 9

DCN: 11-08-01-0810

Dear Customer:

This is your acknowledgement for filing a statement of change of registered office and/or registered agent for a limited liability company with this office.

The effective date of the change is August 2, 2011.

Thank you for contacting our office. If you have any questions, please call (804) 371-9733 or toll-free in Virginia, (866) 722-2551.

Sincerely,

Joel H. Peck Clark of the Commi

Clerk of the Commission



COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

LLC-1016 (07/10)

STATEMENT OF CHANGE OF REGISTERED OFFICE AND/OR REGISTERED AGENT

١. ا	Limite	d Liability	Company's	Name:
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Limited Liability Company's SCC ID No.: \$170452 - 9

Monique's Technical Group, LLC

2. C	urrent registere	d agent's na	ame and reg	istered offic	e address or	n record w	vith the	Commission
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MONIQUE R COLE

	MONIQUE IN OULL	110801	USIU
	11265 SILENTWOOD LN		
	RESTON, VA 20191-0000		
3.	After this statement is filed with the Commission, the nan office in VIRGINIA, including the street and number, if an		f its registered
	Z404-A Striped Henndon, Un 201	Maple Circle	
4.	The registered agent named in item 3 is (mark appropri. (A) an individual who is a resident of Virginia and (B) a member or manager of the limited liability comp (C) a member or manager of a limited liability company that (C) an officer or director of a corporation that is a mer (C) a general partner of a general or limited partnership that (D) a trustee of a trust that is a member or manager of (B) a domestic or foreign stock or nonstock corporation	pany. at is a member or manager of the limited liability company. mber or manager of the limited liability company. at is a member or manager of the limited liability company. of the limited liability company. on, limited liability company or registered limited liabi	
_	partnership authorized to transact business in Vir	rginia.	
5.	Locality of VIRGINIA registered office:	TV	
	(A) Current registered office locality: FAIRFAX COUNT		πY
6	(B) Registered office locality after this statement is filed: After the foregoing change or changes are made, the limit	2.00 dilly 01 2 dily 01	·
0.	of § 13.1-1015 of the Code of Virginia.	Meminy company will be in compliance with the r	equirements
7. ((A) Signed on behalf of the limited liability company by: Wongree Stenoor M.O.A. CHECK IF APPLICABLE (see instructions):		7/14/1/ (date)
	The person signing this document on behalf of the li	limited liability company has been delegated the righ	at and nower to
	manage the company's business and affairs. (Note:		it and power to
(Th	ne statement must be executed in the name of the limited liability company by siness and affairs of the limited liability company, or if no managers or such of OR (B) (May be used in lieu of (A) only for the circumstance:	other persons have been selected, by any member of the limited liabil	nd power to manage the lity company.)
	The undersigned registered agent declares that a copy of principal office address on or before the business day follows:	of this statement has been or will be mailed to the limited	
	/ (da e)	(signature of registered agent)	
	PRIVACY ADVISORY: Information such as social security number, date of b	birth, maiden name, or financial institution account numbers is NOT requ	uired to be

included in business entity documents filed with the Office of the Clerk of the Commission. Any information provided on these documents is subject to public viewing.