

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000005830

**FILED  
Jan 18, 2018  
Secretary of State  
CC7495192416**

**Entity Name:** DAON TRUSTED IDENTITY SERVICES, LLC

**Current Principal Place of Business:**

601 MADISON STREET  
ALEXANDRIA, VA 22314

**Current Mailing Address:**

601 MADISON STREET  
ALEXANDRIA, VA 22314 US

**FEI Number:** 20-4474809

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           GRISSEN, THOMAS  
Address        601 MADISON STREET  
City-State-Zip: ALEXANDRIA VA 22314

Title           PRESIDENT  
Name           MORRIS, CARTER  
Address        601 MADISON STREET  
City-State-Zip: ALEXANDRIA VA 22314

Title           VP  
Name           GIRONDA, STEVE  
Address        601 MADISON STREET  
City-State-Zip: ALEXANDRIA VA 22314

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STEVE GIRONDA

**VICE PRESIDENT**

**01/18/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date