

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000001710

Entity Name: ONE DOT SIX LLC**Current Principal Place of Business:**10802 PARKRIDGE BLVD.
RESTON, VA 20191**Current Mailing Address:**10802 PARKRIDGE BLVD.
RESTON, VA 20191 US**FEI Number:** 27-0818763**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 HUNDT, REED
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191

Title MANAGER
Name HENDRICKS, JARED
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191

Title MANAGER
Name FISCHER, JOHN S.
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191

Title MANAGER
Name HURLEY, ALFRED
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191

Title MANAGER
Name DONAHUE, TIM
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191

Title MANAGER, PRESIDENT, CEO
Name SMITH, DOUGLAS
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191

Title MANAGER
Name SEIDENBERG, IVAN
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191

Title TREASURER
Name BOUGHTON, BRENDAN
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191

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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: BRENDAN BOUGHTON**TREASURER****04/28/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title SECRETARY
Name VALERIE, GREEN
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191

Title CFO
Name ERIC, HARRINGTON
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191

Title ASST. SECRETARY
Name ELIZABETH, CREARY
Address 10802 PARKRIDGE BLVD.
City-State-Zip: RESTON VA 20191