

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M17000003391

Entity Name: APTIM GOVERNMENT SOLUTIONS, LLC

FILED
May 01, 2023
Secretary of State
8059217896CC

Current Principal Place of Business:

1200 BRICKYARD LANE
ATTN: MELISSA HARRELL SUITE 202
BATON ROUGE, LA 70802

Current Mailing Address:

1200 BRICKYARD LANE
ATTN: MELISSA HARRELL SUITE 202
BATON ROUGE, LA 70802 US

FEI Number: 75-3044680

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORTION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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	VP	Title	AUTHORIZED MEMBER
Name	DOWNEY, STEVEN T	Name	APTIM CORP.
Address	1200 BRICKYARD LANE ATTN: MELISSA HARRELL SUITE 202	Address	1200 BRICKYARD LANE ATTN: MELISSA HARRELL SUITE 202
City-State-Zip:	BATON ROUGE LA 70802	City-State-Zip:	BATON ROUGE LA 70802
Title	SECRETARY	Title	PRESIDENT, CEO
Name	BASS, WADE	Name	FALLON, MARK
Address	1200 BRICKYARD LANE ATTN: MELISSA HARRELL SUITE 202	Address	1200 BRICKYARD LANE ATTN: MELISSA HARRELL SUITE 202
City-State-Zip:	BATON ROUGE LA 70802	City-State-Zip:	BATON ROUGE LA 70802
Title	TREASURER	Title	ASST. SECRETARY
Name	LOWE, BRADLEY	Name	PHILLIPS, MARGARET
Address	1200 BRICKYARD LANE ATTN: MELISSA HARRELL SUITE 202	Address	1200 BRICKYARD LANE ATTN: MELISSA HARRELL SUITE 202
City-State-Zip:	BATON ROUGE LA 70802	City-State-Zip:	BATON ROUGE LA 70802
Title	ASST. SECRETARY		
Name	KINDLER, TODD		
Address	1200 BRICKYARD LANE ATTN: MELISSA HARRELL SUITE 202		
City-State-Zip:	BATON ROUGE LA 70802		

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: WADE BASS

SECRETARY

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date