

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000003066

**Entity Name:** CLIENT NETWORK SERVICES, LLC

**Current Principal Place of Business:**

2277 RESEARCH BLVD.  
ROCKVILLE, MD 20850

**Current Mailing Address:**

2277 RESEARCH BLVD.  
ROCKVILLE, MD 20850 US

**FEI Number:** 52-1872098

**Certificate of Status Desired:** No

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

LEGALINC CORPORATE SERVICES INC.  
5237 SUMMERLIN COMMONS BLVD, SUITE 400  
FORT MYERS, FL 33907 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           CNSI INTERMEDIATE, LLC  
Address       2277 RESEARCH BLVD  
City-State-Zip: ROCKVILLE MD 20850

Title           GENERAL COUNSEL  
Name           MORSE, ARNOLD  
Address       2277 RESEARCH BLVD.  
City-State-Zip: ROCKVILLE MD 20850

*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:** ARNOLD MORSE

**GENERAL COUNSEL**

**04/28/2021**

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

\_\_\_\_\_  
Date