

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000002224

Entity Name: DRS ICAS, LLC**Current Principal Place of Business:**2601 MISSION POINT BLVD.
SUITE 250
BEAVERCREEK, OH 45431**Current Mailing Address:**5 SYLVAN WAY
PARSIPPANY, NJ 07054**FEI Number:** 27-1421315**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 DRS DEFENSE SOLUTIONS, LLC
Address 2345 CRYSTAL DRIVE
City-State-Zip: ARLINGTON VA 22202

Title PRESIDENT
Name WALLACE, SALLY
Address 2345 CRYSTAL DRIVE
City-State-Zip: ARLINGTON VA 22202

Title VP, FINANCE
Name BECK, JEFFREY R
Address 2345 CRYSTAL DRIVE
City-State-Zip: ARLINGTON VA 22202

Title VP, OPERATIONS
Name MURPHY, TERENCE
Address 2345 CRYSTAL DRIVE
City-State-Zip: ARLINGTON VA 22202

Title VP, TAXATION
Name RINSKY, JASON
Address 5 SYLVAN WAY
City-State-Zip: PARSEPPANY NJ 07054

Title SECRETARY
Name KREBEL, KATHERINE A
Address 201 EVANS LANE
City-State-Zip: ST. LOUIS MO 63121

Title TREASURER
Name DIPPOLD, MICHAEL
Address 2345 CRYSTAL DRIVE
City-State-Zip: ARLINGTON VA 22202

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: JASON RINSKY

VP TAXATION

04/13/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date