

1.) CORPORATION NAME:

Solutions-IES, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEMS

4701 COX RD STE 301

GLEN ALLEN, VA 23060

DUE DATE: **1/31/2012**

SCC ID NO: **F1694514**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1101 NOWELL RD

CITY/ST/ZIP: RALEIGH, NC 27607-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: ANN M BORDEN
TITLE: PRESIDENT
ADDRESS: SOLUTIONS IES 1101 NOWELL RD
CITY/ST/ZIP/CO: RALEIGH, NC 27607-

OFFICER

DIRECTOR

NAME: M TONY LIEBERMAN
TITLE: SECRETARY
ADDRESS: SOLUTIONS IES 1101 NOWELL RD
CITY/ST/ZIP/CO: RALEIGH, NC 27607-

OFFICER

DIRECTOR

NAME: ROBERT BORDEN
TITLE: DIRECTOR
ADDRESS: SOLUTIONS IES
1101 NOWELL RD
CITY/ST/ZIP/CO: RALEIGH, NC 27607-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ ANN M BORDEN

ANN M BORDEN, PRESIDENT

1/5/2012

SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

PRINTED NAME AND CORPORATE
TITLE

DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.