

1.) CORPORATION NAME:

Viox Services, Inc.

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1778549**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMBNV	2,000
COMAV	500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 15 WEST VOORHEES STREET

CITY/ST/ZIP: CINCINNATI, OH 45215

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:	MICHAEL R VIOX	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	15 W VOORHES ST		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45215		

NAME:	DOUGLAS MYERS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	301 MERRITT SEVEN 6TH FLOOR		
CITY/ST/ZIP/CO:	NORWALK, CT 06851		

NAME:	FRANK RILEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	15 W VOORHES ST		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45215		

NAME:	TIMOTHY VIOX	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	15 W. VOORHEES STREET		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45215		

NAME:	DANIEL J VIOX	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	15 W VOORHES ST		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45215		

NAME:	MAXINE MAURICIO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	301 MERRITT SEVEN 6TH FL		
CITY/ST/ZIP/CO:	NORWALK, CT 06851		

NAME: JAMES EBENSCHWEIGER TITLE: TREASURER ADDRESS: 15 W VOORHES ST CITY/ST/ZIP/CO: CINCINNATI, OH 45215	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: MICHAEL P BORDES TITLE: DIRECTOR ADDRESS: 3100 WOODCREEK DRIVE CITY/ST/ZIP/CO: DOWNERS GROVE, IL 60515	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ MAXINE MAURICIO	MAXINE MAURICIO, SECRETARY	1/7/2013
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.