

1.) CORPORATION NAME: Cohesive Information Solutions, Inc.	DUE DATE: 5/31/2013		
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY BANK OF AMERICA CENTER 16TH FL 1111 E MAIN ST	SCC ID NO: F1896077		
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED		
4.) STATE OR COUNTRY OF INCORPORATION: GA			

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 125 TownPark Drive Suite 240 CITY/ST/ZIP: Kennesaw, GA 30144	
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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.
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NAME: GEORGE LOWRY TITLE: PRESIDENT ADDRESS: 125 TOWNPARK DRIVE CITY/ST/ZIP/CO: KENNESAW, GA 30144	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: Lance Morris TITLE: VICE PRESIDENT ADDRESS: 125 TOWNPARK DRIVE Suite 240 CITY/ST/ZIP/CO: KENNESAW, GA 30144	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: ALEX SZARO TITLE: TREASURER ADDRESS: 125 TOWNPARK DRIVE CITY/ST/ZIP/CO: KENNESAW, GA 30144	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: Tracey Lowry TITLE: DIRECTOR ADDRESS: 125 TownPark Drive Suite 240 CITY/ST/ZIP/CO: Kennesaw, GA 30144	<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/ Tracey Lowry	Tracey Lowry, DIRECTOR	5/20/2013
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.