

Information submitted via Top Hat Plan Statement Online Filing System to U. S.  
Department of Labor under 29 CFR 2520.104-23

Date Completed: 6/19/2018 10:19 AM EST

Confirmation Number: 3889

Amended Confirmation Number:

Employer Information

Name: Initiate Government Solutions, LLC  
Address: 378 Northlake Blvd. #258  
City: North Palm Beach State: FL Zip Code: 33408

Plan Administrator Information

Name: CLAUDINE BERON  
Address: 6465 Loisdale Ct., Ste. 600-D  
City: Springfield State: VA Zip Code: 22150  
Phone: 8667718931  
Email: accounting@initiatesolutions.com

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

ID:1	Plan Name:	Initiate Government Solutions, LLC Nonqualified Deferred Compensation Plan	Number of Employees: 4
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Additional Information:



U. S. Department of Labor  
Employee Benefits Security Administration  
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 3889. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.