State of Rhode Island and Providence Plantations Fee: \$50.00 Office of the Secretary of State
Division Of Business Services
148 W. River Street Providence RI 02904-2615
(401) 222-3040
I OFE
Limited Liability Company Annual Report
Filing Period: September 1 - November 1
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-
16-66(b&c)) is subject to a penalty fee of \$25.00.
ANNUAL REPORT YEAR: 2015
1. ID No. <u>000132528</u>
2. Exact Name of the Limited Liability Company National Credit Adjusters, L.L.C.
3. State of Formation
State: <u>KS</u>
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
Collection Services
5. Principal Office Address
No. and Street: 327 WEST 4TH AVENUE
City or Town:HUTCHINSONState: KSZip: 67501Country: USA
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:
Contact Name: Contact Title: No. and Street: <u>327 WEST 4TH AVENUE</u>
City or Town:HUTCHINSONState: KSZip: 67501Country: USA
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS
Title Individual Name Address First, Middle, Last, Suffix Address, City or Town, State, Zip Code, Country
MANAGER FOURTH AVENUE HOLDING LLC 327 WEST 4TH AVENUE
HUTCHINSON, KS 67501 USA
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 28 Day of October, 2015 at 8:25:59 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By BRAD HOCHSTEIN

Signature of Authorized Person

Form No. 632 Revised 09/07

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