Filing Fee: \$150.00

D Number:		



### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

### LIMITED LIABILITY COMPANY

## APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1.	The name of the limited liability company is: Firstsource Advantage, LLC					
2.	The name, if different, under which it proposes to register ar N/A	nd transact business	in Rhode Island I	s:		
3.	The limited liability company is organized under the laws of New York					
4.	The date of its organization is April 27, 1995					
5.	The period of duration of the limited liability company is (if p	erpetual, so state) 🕏	Per	petra '		
6.	The address of the limited liability company's resident agent in Rhode Island is:					
	155 South Main Street, Suite 301	Providence	, RI	02903		
	(Street Address, <u>not</u> P.O. Box)	(City/Town)		(Zip Code)		
	and the name of the resident agent at such address is		orporation System me of Agent)			
7.	The secretary of state is appointed the agent of the foreign time there is no resident agent or if the resident agent cannulligence.	n limited liability con ot be found or serve	npany for service d following the ex	of process if at any ercise of reasonable		
8.	The address of any office required to be maintained in the limited liability company is organized is:	ne state or other Juri	ediction under th	e laws of which the		
	205 Bryant Woods South, Amherst, NY 14228	<del></del>				
9.	The mailing address for the limited liability company is: 205 Bryant Woods South, Amherst, NY 14228					
				,		
Ret	TIT No. 450 vised: 12/05  -1/24/2808 CT System Online  AR 25	July 143145	SS:S! Mq :	ZON APR 25		

10.	Management of the Limited Liability	y Company:				
A.	The ilmited liability company is to be managed by its members. (If you have checked this box, go to item no. 11.)					
		<u>or</u>				
В.	The limited liability company is to company has managers at the address of each manager.)	be managed $igotimes$ by one (1) or more managers. (If the limited liability time of the filing of these Articles of Organization, state the name and				
	<u>Manager</u>	Address				
A	rjun Mitra	205 Bryant Woods South, Amherst, NY 14228				
Timothy P. Smith		205 Bryant Woods South, Amherst, NY 14228				
11. Th	nis application is accompanied by a c	ertificate of good standing duly authenticated by the secretary of state or other ler which the foreign limited liability company was organized.				
		Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.				
Date	4/21/11	Firstsource Advantage, LLC Print Exact Name of Limited Liability Company Making Application  By				
		Signature of authorized person				

# State of New York Department of State State | State

I hereby certify, that RECEIVABLE SERVICES OF AMERICA, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 04/27/1995, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment RECEIVABLE SERVICES OF AMERICA, LLC, changing its name to ACCOUNT SOLUTIONS GROUP, LLC, was filed 07/23/1997.

A Certificate of Amendment ACCOUNT SOLUTIONS GROUP, LLC, changing its name to FIRSTSOURCE LLC, was filed 01/16/2007.

A Certificate of Amendment FIRSTSOURCE LLC, changing its name to FIRSTSOURCE ADVANTAGE, LLC, was filed 02/27/2007.

OF NEW

two thousand and eleven.

Witness my hand and the official seal of the Department of State at the City of Albany, this 20th day of April

Daniel Shapiro
First Deputy Secretary of State

20110421054I \* EZ



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

