



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**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: 2012

1. ID No. 000509868

2. Exact Name of the Limited Liability Company Icon Equities, LLC

3. State of Formation

State: NV

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

Passive debt buyer

5. Principal Office Address

No. and Street: 3753 HOWARD HUGHES PARKWAY, SUITE
200

City or Town: LAS VEGAS

State: NV Zip: 89169 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: KATE ROUSE Contact Title:

No. and Street: 9201 QUADAY AVE., SUITE 207

City or Town: OTSEGO

State: MN Zip: 55330 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	GEORGE TERZI	7700 IRVINE CENTER DRIVE, SUITE 800 IRVINE, CA 92618 USA
MANAGER	ROBERT KNIGHT	9201 QUADAY AVE., SUITE 207 OTSEGO, MN 55330 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

NATIONAL REGISTERED AGENTS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

Signed this 18 Day of September, 2012 at 1:14:58 PM 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 GEORGE TERZI
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2012 State of Rhode Island and Providence Plantations
All Rights Reserved