State of	of Rhode Island and Pro Office of the Secreta		Fee: \$50.00		
	Division Of Business	Services			
	148 W. River S Providence RI 0290				
HOPE	(401) 222-30				
Foreign Business Corpora	ation				
Annual Report Filing Period: January 1 - March 1					
In accordance with R.I.G.L. 7-1.2- annual report within thirty (30) day (c&d)) is subject to a penalty fee of	rs after the time prescribed by I				
ANNUAL REPORT YEAR: 2016					
1. Corporate ID No. 000950770					
2. Name of Corporation <u>Ally Financial Lease Trust</u>					
3. Street Address Principal Bus	siness Office:				
No. and Street: <u>200 RENAISS</u> City or Town: <u>DETROIT</u>	ANCE CENTER, 10TH FLO	<u>DOR</u> State: <u>MI</u> Zip: <u>48265</u>	Country: <u>USA</u>		
4. Business Phone No.					
5. State of Incorporation					
State: DE					
6. Brief Description of the Cha	racter of Business Conducte	d in Rhode Island			
TO ACQUIRE, HOLD AND RELEASE ITS OWNERSHIP IN LEGAL TITLE TO LEASED VEHICLES					
7. Names and Addresses of the	Officers and Directors:				
All officers and directors must be listed.					
T :4-		A 1 1			
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip	Code, Country		
ASSISTANT SECRETARY AS SERVICER	BARBARA TAYLOR	200 RENAISSANCE C DETROIT, MI 48265 U			
DIRECTOR	DEUTSCHE BANK TRUST COMPANY DELAWARE (AS TRUSTEE)	1011 CENTRE ROAD, S WILMINGTON, DE 19805			

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>		
STK	RESID	\$0.0000	1.00	0		
 9. This report must be execut corporation is in the hands corporation by the receiver Signed this 22 Day of Decemor individuals signing this in. 	of a receiver or trus or trustee. nber, 2015 at 3:40:	stee, this report must in the stee stee stee stee stee stee stee	be executed on b	ehalf of the e individual		
signatory, under penalties of act and deed of the corporate electronic filing, in compliant By <u>BARBARA TYALOR</u> Signature of Authorized Re	ion, and that the fac ce with R.I. Gen. La	cts stated herein are th tws § 7-1.2.				
This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.						
Form No. 630 Revised 09/07						
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