



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: 2016

1. ID No. 000089511

2. Exact Name of the Limited Liability Company NEW HOLLAND CREDIT COMPANY, LLC

3. State of Formation

State: DE

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

52

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

FINANCING

5. Principal Office Address

No. and Street: 700 STATE STREET

City or Town: RACINE

State: WI

Zip: 53404

Country: USA

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

Contact Name: HEATHER OSTERLUND Contact Title: TAX MANAGER

No. and Street: 621 STATE STREET

City or Town: RACINE

State: WI

Zip: 53402

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 | RICK AIDE | 700 STATE STREET RACINE, WI 53404 USA |
| MANAGER | BRETT DAVIS | 700 STATE STREET |

| | | |
|---------|-----------------|--|
| | | RACINE, WI 53404 USA |
| MANAGER | DOUGLAS MACLEOD | 700 STATE STREET RACINE, WI 53404 USA |
| MANAGER | ERIC MATHISON | 700 STATE STREET RACINE, WI 53404 USA |
| MANAGER | THOMAS BECKMANN | 700 STATE STREET RACINE, WI 53404 USA |
| MANAGER | ANDREA PAULIS | 700 STATE STREET RACINE, WI 53404 USA |
| MANAGER | STEPHAN DELVAL | 700 STATE STREET RACINE, WI 53404 USA |

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

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

Signed this 8 Day of September, 2016 at 2:57:34 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 RICK AIDE
Signature of Authorized Person

Form No. 632
Revised 09/07