



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

No Fee

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

**Foreign Business Corp
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000509607

2. Name of Corporation Ally Financial Inc.

3. Street Address Principal Business Office:

No. and Street: 500 WOODWARD AVENUE
City or Town: DETROIT

State: MI Zip: 48226 Country: USA

5. State of Incorporation

State: DE

6. Brief Description of the Character of Business Conducted in Rhode Island

FINANCIAL SERVICES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CEO	JEFFREY J. BROWN	440 SOUTH CHURCH STREET CHARLOTTE, NC 28202 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
PWP	A	\$1,000.0000	4,021,764.00	1021764
PWP	E	\$1,000.0000	2,576,601.00	0
PWP	C	\$0.0100	8,330.00	8330
PWP	G	\$1,000.0000	2,576,601.00	2576601

CWP		\$0.0100	2,021,384.00	1330970
PWP	F-2	\$50.0000	228,750,000.00	118750000

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 11 Day of October, 2016 at 11:21:32 AM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By BARBARA TAYLOR
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, 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:

Nellie M. Gorbea
Secretary of State

