	State of Rhode Island and Providence Plantations Fee Office of the Secretary of State	: \$50.(
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615	
HOPE	(401) 222-3040	
imited Liability C	Company	
Annual Report		
Filing Period: Septembe	er 1 - November 1	
	G.L. 7-16-66(d), each limited liability company failing or refusing	
	within thirty (30) days after the time prescribed by law (R.I.G.L. 7- to a penalty fee of \$25.00.	
ANNUAL REPORT YE	:AR: <u>2016</u>	
1. ID No. <u>000991</u>	1856	
2. Exact Name of the	e Limited Liability Company Madison Credit Management Services, LLC	
3. State of Formatio	n	
State: <u>NJ</u>		
Using the following NA	AICS codes, please select the code that best describes your business.	
	AICS codes, please select the code that best describes your business.	
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Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> 02914

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

Signed this 4 Day of January, 2017 at 3:18:00 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 <u>ROGER CASTILE</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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