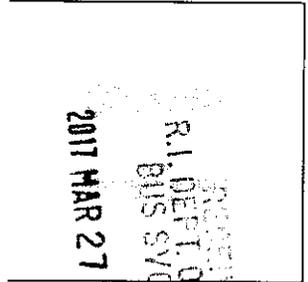


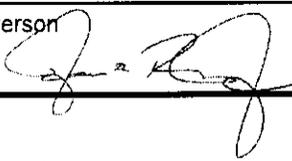


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2015
Limited Liability Company

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.



1. Entity ID Number 000846842		2. Exact name of the Limited Liability Company CACV of Colorado, LLC			
3. NAICS Code 56		4. Brief description of the character of business conducted in Rhode Island Debt Buyer			
5. State of Formation Colorado					
6. Principal Office Address 4340 S. MONACO, 2ND FLOOR			City DENVER	State CO	Zip 80237
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Kathleen Panek			Contact Title Associate General Counsel		
Street Address PO Box 5980			City DENVER	State CO	Zip 80217-5980
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Paul A. Larkins			Manager Name		
Street Address 4340 S. MONACO, 2ND FLOOR			Street Address		
City DENVER	State CO	Zip 80237	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person James Baker Richardson, Jr.				Date 3/15/17	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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