State of Rhode Island and Providence Plantations Fee: \$50.00			
Office of the Secretary of State			
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: 2017			
1. ID No. <u>000512513</u>			
2. Exact Name of the Limited Liability Company FAN DISTRIBUTING, LLC			
3. State of Formation			
State: <u>NY</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>561440</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
FAN DISTRIBUTING, LLC IS A DEBT PURCHASING COMPANY WHOSE SOLE LOCATION			
IS IN ROCHESTER, NY. FAN REFERS ACCOUNTS TO LAW FIRMS AND COLLECTION			
AGENCIES LICENSED IN THE STATE OF RHODE ISLAND FOR COLLECTIONS.			
5. Principal Office Address			
No. and Street: <u>3300 MONROE AVENUE</u> SUITE 205			
City or Town: $\overrightarrow{ROCHESTER}$ State: \overrightarrow{NY} Zip: $\underline{14618}$ Country: \underline{USA}			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>TAWNYA D. ANDERSON</u> Contact Title: <u>OFFICE ASSISTANT</u> No. and Street: <u>3300 MONROE AVENUE</u> SUITE 205			
City or Town: ROCHESTER State: NY Zip: 14618 Country: USA			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	ALAN CAMEROS	15 TRAILWOOD CIRCLE ROCHESTER, NY 14618 USA
Changes Require Filin	RHODE ISLAND - DO NOT ALTER g of Form 642 - R.I.G.L. 7-16-11	MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE, <u>RI</u> 0291		
3. This report must be e	xecuted by an authorized persoi	n pursuant to R.I.G.L. 7-16-66 (b).
	September, 2017 at 2:25:03 PM	by the authorized person. This electron
signature of the individ acknowledgement of the individual's act and dee	ual or individuals signing this in e signatory, under penalties of p ed or the act and deed of the con be electronic filing, in compliant	by the authorized person. This electron astrument constitutes the affirmation or perjury, that this instrument is that npany, and that the facts stated herein an ewith R.I. Gen. Laws § 7-16.
signature of the individ acknowledgement of the individual's act and dee true, as of the date of the By <u>ALAN CAMEROS</u>	ual or individuals signing this in e signatory, under penalties of p ed or the act and deed of the con be electronic filing, in compliant	nstrument constitutes the affirmation or perjury, that this instrument is that npany, and that the facts stated herein a