	State of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
Division Of Business Services 148 W. River Street			
Providence RI 02904-2615			
HOPE	(401) 222-30	40	
Limited Liability Con	npany		
Annual Report Filing Period: September 1	- November 1		
	. 7-16-66(d), each limited liability com		
o file its annual report with 16-66(b&c)) is subject to a	nin thirty (30) days after the time presc penalty fee of \$25.00	ribed by law (R.I.G.L. 7-	
ANNUAL REPORT YEAR			
<b>1. ID No.</b> 00015632	9		
2. Exact Name of the Limited Liability Company <u>OLIPHANT FINANCIAL, LLC</u>			
3. State of Formation			
State: <u>FL</u>			
	ARTICLE III		
0	Code that best describes the primary re information on <u>NAICS</u> can be found	-	entity. Download
<u>561440</u>			
4. Brief Description of t	ne Character of the Business Which	is Actually Conducted in	n Rhode Island
COLLECTION AGEN	<u>CY / DEBT BUYING</u>		
5. Principal Office Addre	ess		
No. and Street: 180	0 2ND ST SUITE 603		
		e: <u>FL</u> Zip: <u>34236</u> (	Country: <u>USA</u>
6. Mailing Address of L	imited Liability Company and Name	or Title of Contact Perse	on:
Contact Name: ROBER	T A MORRIS Contact Title: PRESID	<u>ENT</u>	
	2ND ST SUITE 603		
City or Town: <u>SAR</u>	ASOTA State	e: <u>FL</u> Zip: <u>34236</u> (	Country: <u>USA</u>
7. Name and Address o DO NOT LIST MEMBE	f Each Manager of the Limited Liab RS	ility Company, if Applica	ble.
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State	
MANAGER	ROBERT A MORRIS	1800 2ND ST SARASOTA, FL 34	

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

<u>CORPORATION SERVICE COMPANY</u> <u>222 JEFFERSON BOULEVARD, SUITE 200</u> <u>WARWICK</u>, <u>RI</u> <u>02888</u>

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

**Signed this 7 Day of August, 2018 at 10:07:10 AM 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>ROBERT A MORRIS</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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