| s s | tate of Rhode Island and Pro Office of the Secreta | | Fee: \$50.00 |
|--|--|--|------------------|
| | Division Of Business 148 W. River S Providence RI 0290 | treet | |
| HOPE | (401) 222-304 | | |
| Limited Liability Com Annual Report Filing Period: September 1 | | | |
| | 7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00. | | |
| ANNUAL REPORT YEAR: | <u>2018</u> | | |
| 1. ID No. <u>000147592</u> | 2 | | |
| 2. Exact Name of the Limited Liability Company <u>TD AUTO FINANCE LLC</u> | | | |
| 3. State of Formation | | | |
| State: <u>MI</u> | | | |
| | ARTICLE III | | |
| - | Code that best describes the primary e information on <u>NAICS</u> can be found | - | ity. Download |
| 4. Brief Description of th | e Character of the Business Which | is Actually Conducted in RI | node Island |
| | | , | |
| AUTO RETAIL FINAN | CING | | |
| 5. Principal Office Addre | SS | | |
| No. and Street: 2777 | 77 INKSTER ROAD | | |
| City or Town: $\underline{FARMINGTON HILLS}$ State: \underline{MI} Zip: $\underline{48334}$ Country: \underline{USA} | | | |
| 6. Mailing Address of Li | mited Liability Company and Name | or Title of Contact Person: | |
| Contact Name: Contact | Title: | | |
| | 7 INKSTER ROAD | | |
| City or Town: FARI | MINGTON HILLS State | : <u>MI</u> Zip: <u>48334</u> Cou | ntry: <u>USA</u> |
| 7. Name and Address of DO NOT LIST MEMBE | Each Manager of the Limited Liab RS | ility Company, if Applicable | • |
| Title | Individual Name | Address | |
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip | Code, Country |
| MANAGER | ANDREW STUART | 27777 INKSTER F FARMINGTON HILLS, MI 48 | |
| MANAGER | JOHN JUERS | 27777 INKSTER ROAD | |

FARMINGTON HILLS, MI 48334 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER 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> <u>02914</u>

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

Signed this 27 Day of September, 2018 at 2:55:56 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 MANDY HENDRICKS

Signature of Authorized Person

Form No. 632 Revised 09/07

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