



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

FILED

JUL 01 2019

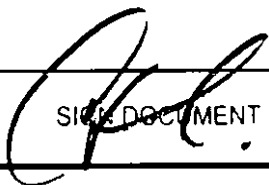
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Annual Report for the year: 2018
Limited Liability Company

- 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 <u>000512513</u>		2. Exact name of the Limited Liability Company <u>FAN Distributing, LLC</u>			
3. NAICS Code <u>561440</u>		4. Brief description of the character of business conducted in Rhode Island <u>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.</u>			
5. State of Formation <u>NY</u>					
6. Principal Office Address <u>140 Allen's Creek Rd., Ste 210</u>		City <u>Rochester</u>	State <u>NY</u>	Zip <u>14618</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Arthur Kaempffe</u>			Contact Title <u>Manager</u>		
Street Address <u>140 Allen's Creek Rd, Ste 210</u>		City <u>Rochester</u>	State <u>NY</u>	Zip <u>14618</u>	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <u>Arthur Kaempffe</u>		Manager Name			
Street Address <u>140 Allen's Creek Rd., Ste 210</u>		Street Address			
City <u>Rochester</u>	State <u>NY</u>	Zip <u>14618</u>	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 <u>A. KAEMPFER</u>				Date <u>28 JUN 2019</u>	
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