	State of Rhode 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:	2020			
1. ID No. <u>001022178</u>	3			
2. Exact Name of the Limited Liability Company Jefferson Capital Systems, LLC				
3. State of Formation				
State: <u>GA</u>				
	ARTICLE III			
the list of codes here. More	Code that best describes the primary e information on <u>NAICS</u> can be found	-	the entity. Download	
<u>561440</u>				
4. Brief Description of th	e Character of the Business Which	is Actually Conducte	d in Rhode Island	
DEBT COLLECTION				
5. Principal Office Addre	SS			
No. and Street: 16 MCLELAND ROAD				
	CLOUD State:	<u>MN</u> Zip: <u>56303</u>	Country: <u>USA</u>	
6. Mailing Address of Li	nited Liability Company and Name	or Title of Contact Pe	erson:	
Contact Name: Contact				
	<u>CLELAND ROAD</u> LOUD State:	MN Zip: <u>56303</u>	Country: <u>USA</u>	
7. Name and Address of DO NOT LIST MEMBE	Each Manager of the Limited Liab RS	ility Company, if App	licable.	
Title	Individual Name	Addr	ess	
	First, Middle, Last, Suffix	Address, City or Town, S	tate, Zip Code, Country	
MANAGER	JOSEPH BASIL FEJES	16 MCLE ST CLOUD, MM	LAND ROAD N 56303 USA	
MANAGER	EDWARD PAUL DUNN JR.	16 MCLE	LAND ROAD	

		ST. CLOUD, MN 56303 USA		
MANAGER	DAVID MARC BURTON	16 MCLELAND ROAD ST. CLOUD, MN 56303 USA		
MANAGER	MATTHEW JAMES PFOHL	16 MCLELAND ROAD ST. CLOUD, MN 56303 USA		
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888				
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).				
Signed this 21 Day of August, 2020 at 11:58:51 AM by the authorized person. <i>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.</i>				
By <u>HOWARD ENDERS</u> Signature of Authorized Person				
Form No. 632 Revised 09/07				
© 2007 - 2020 State of Rhode Is All Rights Reserved	sland			