	State of Rhode I Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River Str Providence RI 02904	reet	
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 prescri penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2020</u>		
1. ID No. <u>001679180</u>	<u>)</u>		
2. Exact Name of the Limited Liability Company Green Mountain Capital, LLC			
3. State of Formation			
State: <u>DE</u>			
-	Code that best describes the primary be information on <u>NAICS</u> can be found o	-	entity. Download
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in	n Rhode Island
COLLECTION AGENC	CY		
5. Principal Office Addre	SS		
No. and Street: <u>110</u>	ss <u>15 OAKDALE PL</u> <u>ULDER</u> State: <u>CC</u>	<u>)</u> Zip: <u>80304</u> C	ountry: <u>USA</u>
No. and Street: <u>110</u> City or Town: <u>BO</u>	5 OAKDALE PL		•
No. and Street: 110 City or Town: BO 6. Mailing Address of Lin Contact Name: Contact No. and Street: 1105	05 OAKDALE PL ULDER State: CC mited Liability Company and Name	or Title of Contact Pers	•
No. and Street:110City or Town:BO6. Mailing Address of LineContact Name:ContactNo. and Street:1105City or Town:BOL	25 OAKDALE PL ULDER State: CO mited Liability Company and Name Title: 5 OAKDALE PL JLDER State: CO Each Manager of the Limited Liability	or Title of Contact Pers	on: ountry: <u>USA</u>
No. and Street:110City or Town:BO6. Mailing Address of LinContact Name:ContactNo. and Street:1105City or Town:BOL7. Name and Address of	25 OAKDALE PL ULDER State: CO mited Liability Company and Name Title: 5 OAKDALE PL JLDER State: CO Each Manager of the Limited Liability	or Title of Contact Pers	on: ountry: <u>USA</u> able.

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 27 Day of October, 2020 at 3:57:42 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 <u>BROOKS DYLAN JOHNSON</u> Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved