RI SOS Filing Number: 202450004250 Date: 4/2/2024 4:00:00 PM



Annual Report for the year: Limited Liability Company

2024

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by May 31.

Entity ID Number	2. Exact name of the Limit	2. Exact name of the Limited Liability Company		
1753308	ACK Recovery, L	ACK Recovery, LLC		
3. NAICS Code 561440	· '	Brief description of the character of business conducted in Rhode Island Debt collections and consolidations		
5. State of Formation				
6. Principal Office Address		City	State	Zip
5600 Post Road, 114-163		East Greenwich	RI	02818
7. Mailing Address of Limite	ed Liability Company and Name o	r Title of Contact Person		<u> </u>
Contact Name Christopher Runci		Contact Title Member		
Street Address 5600 Post Road, 114-163		City East Greenwich	State RI	^{Zıp} 02818
3. The Resident Agent infor	mation currently of record with th	e RI Department of State is accurate	. Changes requir	e filing Form 642.
3. Under penalty of perjur statements, and that all s	y, I declare and affirm that I had tatements contained herein are	ve examined this report, including true and correct.	any accompany	ring schedules and
Name of Authorized Person			Date	
TOTAL STRUCTURE OF CISOL			l.	



MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 **Website:** www.sos.ri.gov