

No. <b>W 121561</b>		<b>Due no later than Feb 28, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  CITIFINANCIAL SERVICING LLC TAX AND REPORTING P.O. BOX 30509 TAMPA FL 33631 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE 83705			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	GREGORY LECHNER	300 ST PAUL PLACE	BALTIMORE	MD	USA	21202	
MANAGER	LINDA S DAVIS	300 ST PAUL PLACE	BALTIMORE	MD	USA	21202	
MANAGER	JAMES W SCHNEIDER	300 ST PAUL PLACE	BALTIMORE	MD	USA	21202	
5. Organized Under the Laws of:  <b>DE</b> <b>W 121561</b>		6. Annual Report must be signed.*  Signature: LISA A HOFFMAN Name (type or print): LISA A HOFFMAN  Date: 01/13/2015 Title: ASSISTANT SECRETARY					
Processed 01/13/2015      * Electronically provided signatures are accepted as original signatures.							