2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2010
Secretary of State

DOCUMENT# L09000036334

Entity Name: ALLY RISK SERVICES LLC

Current Principal Place of Business:

300 GALLERIA OFFICENTRE, SUITE 200
SOUTHFIELD, MI 48034

New Principal Place of Business:

Current Mailing Address:

300 GALLERIA OFFICENTRE, SUITE 200
SOUTHFIELD, MI 48034

New Mailing Address:

200 RENAISSANCE CENTER
482 B09 C24
DETROIT, MI 48265

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: GMAC INSURANCE HOLDINGS, INC.
Address: 300 GALLERIA OFFICENTRE, SUITE 200
City-St-Zip: SOUTHFIELD, MI 48034

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: BARBARA TAYLOR AS 01/12/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date