

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000002967

**Entity Name:** CIT FINANCE LLC

**Current Principal Place of Business:**

1 CIT DRIVE  
LIVINGSTON, NJ 07039

**Current Mailing Address:**

1 CIT DRIVE, #2108-A  
LIVINGSTON, NJ 07039 US

**FEI Number: 45-2104840**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

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

*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

**Authorized Person(s) Detail :**

Title MGR  
Name MCAVOY, SARAH  
Address 11 WEST 42ND STREET  
City-State-Zip: NEW YORK NY 10036

Title MGR  
Name SEUFERT, LINDA M  
Address 1 CIT DRIVE  
City-State-Zip: LIVINGSTON NJ 07039

Title MANAGER  
Name MANDELBAUM, ERIC S.  
Address 1 CIT DRIVE  
City-State-Zip: LIVINGSTON NJ 07039

Title PRESIDENT  
Name ALEMANY, ELLEN R.  
Address 11 WEST 42ND STREET  
City-State-Zip: NEW YORK NY 10036

Title AUTHORIZED REPRESENTATIVE  
Name NASSANEY, KATHLEEN  
Address 1 CIT DRIVE  
City-State-Zip: LIVINGSTON NJ 07039

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: KATHLEEN NASSANEY**

**DIRECTOR STATE AND  
LOCAL TAX**

**04/26/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date