

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000006040

**Entity Name:** RED IRON ACCEPTANCE, LLC**Current Principal Place of Business:**1475 E WOODFIELD RD, STE. 1000  
SCHAUMBURG, IL 60173**Current Mailing Address:**1475 E WOODFIELD RD, STE. 1000  
SCHAUMBURG, IL 60173 US**FEI Number:** 27-0706160**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T 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:** AMARI GAMBLE

01/04/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MEALS, CHRISTOPHER  
Address 1475 E WOODFIELD RD  
SUITE 1000  
City-State-Zip: SCHAUMBURG IL 60173

Title MGR  
Name DRAKE, ANGELA C  
Address 8111 LYNDAL AVE. S  
City-State-Zip: BLOOMINGTON MN 55420

Title MANAGER  
Name FAROOQ, ZAFAR  
Address 1475 E WOODFIELD RD  
SUITE 1000  
City-State-Zip: SCHAUMBURG IL 60173

Title MANAGER  
Name KEREKES, JULIE  
Address 8111 LYNDAL AVE. S.  
City-State-Zip: BLOOMINGTON MN 55420

Title MGR  
Name FUNK, EDRIC C.  
Address 8111 LYNDAL AVE. S  
City-State-Zip: BLOOMINGTON MN 55420

Title SECRETARY  
Name MCFADDEN, TIMOTHY S.  
Address 1475 E WOODFIELD RD  
SUITE 1000  
City-State-Zip: SCHAUMBURG IL 60173

Title MANAGER  
Name WULF, MARYRUTH  
Address 1475 E WOODFIELD RD  
SUITE 1000  
City-State-Zip: SCHAUMBURG IL 60173

Title MANAGER  
Name JANEY, GREGORY  
Address 8111 LYNDAL AVENUE SOUH  
City-State-Zip: BLOOMINGTON MN 55420

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*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:** TIMOTHY S MCFADDEN**SECRETARY**

01/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title	MANAGER
Name	DEVERELL, JAY R.
Address	1475 E WOODFIELD RD. SUITE 1000
City-State-Zip:	SCHAUMBURG IL 60173