

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004348

Entity Name: DCM SERVICES, LLC

FILED  
Feb 08, 2012  
Secretary of State

## Current Principal Place of Business:

4150 OLSON MEMORIAL HWY  
SUITE 200  
MINNEAPOLIS, MN 55422

## New Principal Place of Business:

7601 PENN AVENUE SOUTH  
SUITE A-600  
RICHFIELD, MN 55423

## Current Mailing Address:

4150 OLSON MEMORIAL HWY  
SUITE 200  
MINNEAPOLIS, MN 55422

## New Mailing Address:

7601 PENN AVENUE SOUTH  
SUITE A-600  
RICHFIELD, MN 55423

FEI Number: 20-5032546

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: DECEASED CREDIT MANAGEMENT, LLC  
Address: 7601 PENN AVENUE SOUTH, SUITE A-600  
City-St-Zip: RICHFIELD, MN 55423

Title: MGR  
Name: BOYUM, BEN  
Address: 7601 PENN AVENUE SOUTH, SUITE A-600  
City-St-Zip: RICHFIELD, MN 55423

Title: MGR  
Name: BECKER, GARY W  
Address: 7601 PENN AVENUE SOUTH, SUITE A-600  
City-St-Zip: RICHFIELD, MN 55423

Title: MGR  
Name: BALOGH, JAMES  
Address: 7601 PENN AVENUE SOUTH, SUITE A-600  
City-St-Zip: RICHFIELD, MN 55423

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 Statutes.

SIGNATURE: BEN BOYUM

MGR

02/08/2012

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