

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000004055

**Entity Name:** VANTAGE FINANCE, LLC

**Current Principal Place of Business:**

17117 BURT ST. STE. 300  
OMAHA, NE 68118

**Current Mailing Address:**

17117 BURT ST. STE. 300  
OMAHA, NE 68118 US

**FEI Number: 27-3648719**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 HALVERSON, KEVIN  
Address 17117 BURT ST. STE. 300  
City-State-Zip: OMAHA NE 68118

Title MGR  
Name KOPF, SHARI  
Address 17117 BURT ST. STE. 300  
City-State-Zip: OMAHA NE 68118

Title MGR  
Name BUSHNELL, KENT  
Address 17117 BURT ST. STE. 300  
City-State-Zip: OMAHA NE 68118

Title MGR  
Name TDC HOLDINGS I  
Address 17117 BURT ST. STE. 300  
City-State-Zip: OMAHA NE 68118

Title MGR  
Name BLENKLE, MATT  
Address 17117 BURT ST. STE. 300  
City-State-Zip: OMAHA NE 68118

*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: SHARI KOPF**

**MGR**

**04/12/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date